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ABSTRACT

This guide is a compilation of material critical to incarcerated women and to women in the community who have a history involving the criminal justice system. It provides them with a framework for analyzing problems, formulating strategies for change, and crafting solutions. Section 1 deals with negotiating the prison system. Six chapters address these topics: communicating with the outside, sentence computation, religious practice, sexual harassment and sexual abuse, disciplinary reports, and dispute resolution. Section 2 concerns community transitions. Four chapters focus on furloughs, escorted trips, surviving the parole process, and halfway houses. Section 3 discusses maintaining family ties in two chapters: child custody concerns for incarcerated women and filing for divorce. Section 4 deals with staying healthy. Its five chapters cover general medical care, pap smears and breast exam, AIDS and other sexually transmitted diseases, pregnancy, and getting help for drug addiction and alcoholism. Section 5 provides information on community resources in five chapters on public benefits, housing, job training referral sources, education and literacy training programs, and drug treatment programs. Many chapters conclude with names of individuals or organizations to contact for assistance. (YLB)

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ED 399 441

A VISION BEYOND SURVIVAL

A RESOURCE GUIDE FOR INCARCERATED WOMEN

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(The information and opinions contained in this Resource Guide do not necessarily represent the views or positions of the above mentioned organizations or foundations.)

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INTRODUCTION

Over the past fifteen years there has been a dramatic increase in the number of people incarcerated in the criminal justice system. However, the rate of increase has soared to crisis proportions among the women's prison population. Between 1980 and 1993, the number of women incarcerated in state and federal prisons grew from 12,420 to 55,365. This growth rate significantly outstripped the growth rate for men (313% compared to 182%).

This national crisis has been fueled in large part by the combination of enhanced penalties and mandatory minimum sentences for drug offenses. Individuals who in the past may have been sanctioned in the community or referred for treatment are now sentenced to prison terms. The combined focus on interdiction rather than on treatment and prevention, along with mandatory minimums, has had a devastating impact on women. Today, women are more likely than men to be serving sentences for drug offenses. In 1993, 64% of women in federal prisons and 32% of women in state prisons were incarcerated for drug offenses. In the District of Columbia, 59% of women prisoners are currently serving sentences for drug offenses. Nationally, one in four women prisoners reported committing their offense to obtain money to purchase drugs, compared to one in six male prisoners. Moreover, women have higher rates of drug use and use more serious drugs than men. In 1993, 71% of women arrested in the District of Columbia, compared to 60% of men, tested positive for any drug. Sixty-two percent of women, compared to 37% of men, tested positive for cocaine.

The District of Columbia has been devastated by these trends and has *by far* the highest incarceration rate of any jurisdiction in the nation. While the national rate of incarceration is 38 per 100,000 women, the rate of incarceration in the District of Columbia is 119 per 100,000 women.

In 1990, the National Women's Law Center launched the Women in Prison Project to address the serious problems confronting women prisoners in the District of Columbia Department of Corrections. These problems involve child custody arrangements; the lack of medical care, drug treatment services, and education and vocational training programs for women prisoners; and the need for housing and public benefits upon their release. Today, the Project provides legal, counseling, and advocacy services to approximately 1,000 women incarcerated at the Lorton Minimum Security Annex, the Correctional Treatment Facility, the District of Columbia Central Detention Facility, and halfway houses, along with women released to the community.

At the core of the Center's work with women prisoners is its legal education seminar series conducted on a weekly basis at the Lorton Minimum Security Annex. The Series, known formally as the "Women's Education and Empowerment Series," has been in place for five years and is an important vehicle for disseminating legal and other information to women prisoners. Many of the women's legal questions are answered through the Series. For others, the Series is the first step toward making custody arrangements for their children, seeking visitation, or trying to obtain health care, housing, or public benefits. The Series has also

become an important vehicle for educating the community about the concerns of women in the criminal justice system. These concerns mirror those of women in the community — concerns about family, children and creating a community where they and their families can thrive.

The Series is a voluntary twelve-week program focusing on issues selected by the women in the class. Women are encouraged to attend sessions that interest them. The Center acts as a referral source by bringing in key providers in the areas identified by women prisoners. The Center facilitates these weekly presentations and works with the speakers to respond to the needs of the women. The Series has been an exciting learning experience for the women, for the Center, and for the community. It has fundamentally changed the manner in which women prisoners interact with the courts, social services, the correctional system, and each other. To date, over 60 organizations and countless individuals have participated in the Series. These collaborating organizations and individuals are listed in the pages that follow.

Two years ago, the Center decided to compile the critical information provided in the Series and to distribute it to all District of Columbia women prisoners. This compilation enables us to provide information and resources to large groups of incarcerated women who are unable to participate in the Series, and to reach women in the community who have a history involving the criminal justice system. This *Resource Guide* collects the information from the Series and arranges it in a manner that women prisoners and advocates will find easy to use. It includes both legal and practical information and, perhaps most importantly, the names and phone numbers of individuals and organizations who may be of assistance to women prisoners and recently released women.

Although the *Resource Guide for Incarcerated Women* is comprehensive, it is not exhaustive. Additionally, policy and practices in this area change daily. As with any resource that attempts to record information that is subject to change, some of the information contained in this manual will rapidly become out of date. The *Resource Guide*, however, provides a framework for analyzing problems, formulating strategies for change, and crafting solutions. The overarching philosophy of the Center's work with women prisoners is that information should be accessible and that individuals are empowered by taking an active role in resolving their own problems. The *Resource Guide* embodies this philosophy.

The *Resource Guide* is divided into five major sections: (1) Negotiating the Prison System; (2) Community Transitions; (3) Maintaining Family Ties; (4) Staying Healthy; and (5) Community Resources. Several chapters are devoted in each section to key issues of interest to women prisoners and women who have been recently released to the community. While the manual takes a comprehensive approach to the entire spectrum of problems that women may potentially face while incarcerated, each chapter is designed to stand independently, in order to respond to the individual and varied needs of women prisoners.

FAMILY

The Honorable Mildred Edwards, Associate Judge, D.C. Superior Court
The Honorable Gladys Kessler, Associate Judge,
U.S. District Court for the District of Columbia
Child Abuse Unit, Social Services Division, D.C. Superior Court
Division of Child Protection, Children's National Medical Center
Justine Dunlap, Counsel for Child Abuse and Neglect
Family and Child Services of the District of Columbia
Office of Paternity and Child Support Enforcement for the District of Columbia
Women and the Law Clinic, American University

EMPLOYMENT

District of Columbia Apprenticeship Council
Bernadette Gross, Wider Opportunities for Women
Lydia King, B.C. Associates
Project Mainstream, U.S. Probation Office,
U. S. District Court for the District of Columbia ,
STEP Employment Program
Women's Bureau, U.S. Department of Labor

LEGAL INFORMATION AND ASSISTANCE

Child Support Section, Office of Corporation Counsel
D.C. Bar, Public Services Activities Corporation
D.C. Board of Parole
D.C. Prisoners' Legal Services Project
Georgetown University Law Center Sex Discrimination Clinic, Domestic Violence Project
Georgetown Women's Law and Public Policy Fellowship Program
Legal Assistance Branch, D.C. Superior Court
Office of Fair Hearings, Department of Human Services
Prisoners' Rights Program, D.C. Public Defender Service
Records Office, D.C. Department of Corrections
University Legal Services

*The information and opinions contained in this *Resource Guide* do not necessarily represent the views or positions of these organizations or individuals.

HEALTH

ADASA Comprehensive Aftercare Center
D.C. General Hospital, Women's Services Clinic
District of Columbia Women's Council on AIDS
East of the River Health Clinic
Georgetown University Medical Center
Health Care for the Homeless
HUSER Institute
Legal Action Center
March of Dimes Birth Defects Foundation, National Capital Area Chapter
Pre-Natal Substance Abuse Program, D.C. General Hospital
Pregnant/Post-Partum Women's and Infants' Service Program, D.C. General Hospital

PROGRAMS AND SERVICES

University College, University of Maryland
ARCH Housing Corp.
Children's Defense Fund
ConServe
D.C. Commission for Women
D.C. Housing Finance Agency
Department for Public and Assisted Housing
Emergency Domestic Relations Project, Women's Legal Defense Fund
Hannah House
Home Purchase Assistance Program, DC Local Development Corporation
MANNA, Inc.
Mount Carmel House
My Sister's Place
New Endeavors by Women
Prison Fellowship Ministries
Trinity Housing
University of the District of Columbia Program at Lorton
Washington Extended House, Inc.
Washington Halfway Home for Women, Inc.
Weekend College, University of District of Columbia
Project Safe, Second Genesis/Whitman-Walker Clinic
Sexually Transmitted Disease Control Bureau, Commission of Public Health
Starr Project Coordinator, Planned Parenthood of Metropolitan Washington
Whitman Walker/Max Robinson Center

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1. COMMUNICATING WITH THE OUTSIDE

INTRODUCTION

Information is one of the most important resources for prisoners. Therefore, the ability to communicate with people both inside and outside the prison — including family, friends, and lawyers — is crucial. Although prisoners are allowed to send and receive mail, place telephone calls, and receive visitors, these rights are limited. This chapter provides an overview of your rights to communicate with people on the outside, and instructs you what to do if you believe your rights are being violated.

SENDING AND RECEIVING MAIL

You have a constitutional right to correspond with people outside the prison. However, the Department of Corrections can limit prisoners' access to the mail system if it has an important reason for doing so, and if it believes that the information contained in the incoming or outgoing mail threatens prison security. For example, prisoners are not allowed to receive magazines that contain instructions for manufacturing explosives, drugs, or other unlawful substances. Also prohibited are:

- materials that advocate violence within the prison;
- materials of a type which have caused violence or other serious disruption of prison security in the past;
- materials that advocate religious, racial or national hatred in such a way that they create a serious danger of violence in prison;
- materials that encourage criminal sexual behavior or sexual behavior against the prison rules; and
- materials that are detrimental to rehabilitation.

Legal Mail

Generally, all non-legal correspondence written by inmates must remain unsealed so that prison officials may inspect them for contraband. Prisoners have a right to send **sealed** letters to their lawyers, the courts, prison administrators, members of the DC Parole Board, and other government officials. You should mark the envelope "legal mail". Outgoing legal mail **cannot** be opened or inspected by DCDC officials. However, the mail prisoners **receive** from any of these people or institutions can be opened in their presence by a prison official. Prison officials may examine the contents of the letter/package for contraband or shake the letter/package without opening it to check for contraband. Although these letters/packages can be opened in your presence, **legal mail cannot be read by prison officials**. For this reason, mail from your attorneys should be stamped "legal mail" on both the envelope and the letter.

Contraband

All incoming and outgoing mail will be examined for contraband. Because money is considered contraband in prison, prisoners are not allowed to send or receive money directly through the mail. **If any cash, checks, or money orders are found in either the incoming or outgoing mail, they will be removed and should be credited to your inmate account**. The mailroom employee will fill out a collection receipt that details: (1) the amount of money sent; (2) the date; (3) the form the money came in — cash, check, or money order; and (4) the name of the sender. You should receive a receipt for the transaction. Thereafter, the money is sent to the central Finance Office and credited to your account. This can take up several weeks, and money sent at the end of the month takes longer to reach your account because the Finance Office prepares the inmate payroll at this time. Also,

checks must clear through the bank before the Finance Office will credit them to your account — money orders and cashier's checks are credited immediately.

If contraband other than money is discovered in your mail, it will be seized and both you and the sender will be informed of the seizure. If you believe that an item has been wrongfully seized, you may challenge the seizure by filing an Inmate Grievance Procedure form. (See Chapter VI, "Dispute Resolution".)

Postage

As long as you provide the postage for your outgoing mail, you are allowed to send and receive an unlimited number of letters and packages. If you do not have money for postage, you will still receive all the letters and packages sent to you. To send letters without postage, your chief case manager or unit manager must certify that you are "indigent." In other words, you must have no money available. If you are certified as indigent, you will be allowed to send two postage-free letters per week.

Mail Delivery

Letters should be delivered and picked up within 24 hours of receipt by the mailroom. The mailroom is open 5 days a week (except on holidays), and packages should be delivered to you within 48 hours from the time the prison receives them. Your mail should be delivered only to you by an authorized Mail Officer or Alternate Mail Officer. Mail and packages should not be left on your bed or under your door, and should not be delivered to another resident or unauthorized employee.

If you are transferred or released, your mail should be forwarded to you. You must provide a forwarding address in order for your mail to be forwarded. If you have no forwarding address, the mail should be returned to the sender. Sometimes this does not happen, and mail can take months to reach you. For example, often a prisoner's Notice of Action for Parole arrives at the Correctional Treatment Facility ("CTF"), but the prisoner has been transferred to the Lorton Minimum Security ("Annex"). It may take several months for the Notice of Action to reach the recipient. You can prevent this from happening by providing a forwarding address.

PLACING PHONE CALLS

Prisoners do not have a constitutional right to make phone calls. Moreover, the DC Department of Corrections records all telephone calls made through the collect prisoner telephone system, including all calls made to lawyers. This means that **the contents of your conversation may be used against you in a legal proceeding**, even if you are discussing your case with your lawyer.

However, prisoners do have a right under DC Department Order No. 4070.1 to communicate with their lawyers in a confidential manner. Each facility is required to provide inmates with reasonable access to designated telephones for placing legal calls. These telephones should be located so as to afford privacy to the inmate making the call. **We strongly recommend that prisoners do not use the collect call system for legal telephone calls, and instead arrange for confidential legal telephone calls.** If you do call your attorney on the collect telephone, you should advise him or her that the call is being recorded **before** you discuss any matter that might affect your case.

Legal calls should be of reasonable length and should be placed at reasonable times of the day. In addition, the time periods available for legal calls should not conflict with the official count.

BEST COPY AVAILABLE

Prisoners can request confidential telephone calls from their case manager, which normally must be authorized within 24 hours. Your attorney may also request a confidential telephone call by contacting your case manager. If you have an emergency and need to speak with your attorney immediately, you should ask the administrator or deputy administrator to expedite the process.

Prisoners who are incarcerated in out-of-state facilities find it more difficult to schedule legal phone calls. There are usually no provisions made for legal telephone calls at these facilities, so prisoners have no choice but to telephone attorneys on a collect call basis. Unfortunately, these phone calls are usually within hearing distance of other inmates and correctional administrators.

VISITATION

Visitors List

In order to receive visitors, prisoners must provide their case manager with a list of the names and addresses of up to 12 visitors. If you are at the Annex or CTF, your case manager must return your visitors list to you and indicate whether your visitors have been approved. Children under 18 can visit the prison if they are accompanied by an adult and have the permission of a parent or guardian. The DC Department of Corrections will not approve lists containing the following individuals: (1) other prisoners in halfway houses; or (2) people released from the Department of Corrections within 6 months (unless specifically authorized by the Institution Administrator in writing). If someone on your list is denied permission to visit the prison, you must be given a reason for the denial.

Visiting Schedule

- ***Annex***
  Tues. and Thurs. — 6:00 pm to 10:00 pm
  Sat., Sun., and Holidays — 8:00 am to 2:00 pm

  Up to two adults, and an unlimited number of children, can visit at one time.

  The Annex does not limit the length or number of visits allowed.

- ***CTF***
  Tues. and Thurs. — 6:00 pm to 8:00 pm
  Sat. and Sun. — 8:30 am to noon (visitors must arrive before 11 am)

  Up to three adults, and an unlimited number of children, may visit at one time.

  Visits may last up to 1 hour, and prisoners are allowed 2 visits per week.

- ***Jail***
  Mon.-Sat. (including holidays) — Noon to 8:00 pm (visitors must arrive by 7:00 pm). Visits are granted to each prisoner 2 days a week depending on the first initial of their last name:

A - H	Mon. and Thurs.
I - P	Tues. and Fri.
Q - Z	Wed. and Sat.

  Visitors who live more than 50 miles from DC are allowed a one-time courtesy visit on any day. After that, they must follow the schedule, or make other arrangements by contacting the Assistant Administrator for Programs at (202) 673-8433.

  Up to two adults and two children may visit at one time.

  Each resident is allowed four 1/2 hour visits per week.

Rules Governing Prison Visits

Prisoners should advise any potential visitors that they will be required to present picture identification and sign in and out at the appropriate facility. Any visitor who refuses to provide identification will have their visiting privileges suspended. In addition, visitors should call in advance for each institution's dress code (for example, visitors are not allowed to wear "sexually provocative" clothing or clothing that is skimpy or that clings to the body). Although the dress code may not seem important, visitors will be turned away for not wearing "appropriate" attire. Unfortunately, the standard governing what is "appropriate" is very subjective. This results in arbitrary enforcement of the dress code depending on which guard is on duty. Nonetheless, it is still very important for visitors to call ahead and make sure their clothing fits the dress code.

Visitors and their personal belongings will be searched for contraband. Any contraband found on a visitor will be confiscated, and the visit will be denied. The correctional officer on duty is also required to file a written report with the Warden, and the visitor's visiting privileges may be suspended or terminated. In addition, the visitor may be subject to criminal prosecution for possessing or trying to bring major contraband into the prison, such as drugs or weapons. Any visitor who refuses to submit to a search will be denied visitation privileges.

At the Jail, visits are generally "non-contact," which means that a plexi-glass partition separates prisoners from their visitors and contact is over the phone. Visits at CTF and the Annex take place in a designated visiting room. The DC Department Order governing visitation states that "all visits shall be conducted in a courteous, orderly, and socially acceptable manner. This especially pertains to manner of dress and physical contact between inmates and visitors." However, "limited socially acceptable kissing, embracing, or holding hands may be allowed." The shift supervisor may terminate any visit that does not comply with this requirement. In addition, prisoners and visitors are not allowed to exchange any items that are not specifically approved by the Department of Corrections.

Halfway houses have their own rules governing visitation. Consult your house rules or Chapter X of this manual for information.

Suspension of Visiting Privileges and Visiting Appeal Procedures

Generally, visitors who violate the rules governing visitation will be denied visiting privileges for 30 days to 1 year, or, for a major infraction or repeated violations of the regulations, 1 year to permanent suspension. If an individual is temporarily or permanently prohibited from visiting a prisoner, the visitor and inmate should be notified in writing of the reason for the suspension or termination in visiting privileges.

Any individual who is prohibited from visiting a prisoner may appeal the decision by sending a letter to the Deputy Director for Institutions. The appeal should explain why the visiting privileges should be reinstated. The Deputy Director for Institutions must respond to the appeal within 30 days.

A potential visitor who is not satisfied with the results of his or her appeal may appeal the Deputy Director's decision to the Executive Deputy Director of the Department of Corrections. The Executive Deputy Director must respond to the appeal within 30 days.

A potential visitor who is not satisfied with the results of his or her appeal to the Executive Deputy Director may file a final appeal to the Director of the Department of Corrections. The Director should respond within 30 days. The Director is the final authority in the appeals process.

Legal Visits

Attorneys are generally allowed unlimited visits with their clients at DCDC facilities. Visits by legal assistants, investigators, and law clerks require written authorization from the Deputy Warden for Institutions. Correctional facilities must make a private space available for legal visits where communications can be kept confidential. Your attorney has every right to request interviews to be conducted in a space that will preserve the confidentiality of communications between you and her or him. For example, at the Jail and CTF, attorney interview rooms are designed to protect the confidentiality of attorney-client communications. At the Annex, interviews are conducted where space is available, and may be held in the prison chapel or the shift supervisor's office.

RESOURCES

For further information, consult:

DC Department Order No. 4070.4A (dated September 11, 1992), Inmate Correspondence.

DC Department Order No. 4070.1 (dated April 8, 1994), Inmate Telephone Access.

DC Department Order No. 4080.1A (dated October 9, 1992), Inmate Visiting Regulations.

Prisoners' Rights Program
D.C. Public Defender Service
P.O. Box 47
Lorton, Virginia 22079
(703) 643-1034
(202) 628-1200

Citizens United for the Rehabilitation of Errants (CURE)
P.O. Box 2310
Washington, DC 20013
(202) 789-2126

CONCLUSION

If you have problems receiving or sending mail, placing telephone calls, or arranging visits with attorneys or other individuals, register your complaint with the Warden of your facility through the Inmate Grievance Procedure. For detailed information on how to file an Inmate Grievance Procedure, see Chapter VI, "Dispute Resolution". Be sure to include a detailed description of the problems you have encountered. If you require assistance, send a copy of your IGP to the Prisoners' Rights program of the D.C. Public Defender Service.

II. SENTENCE COMPUTATION

INTRODUCTION

It is very important for prisoners to examine and understand their face sheet. However, many prisoners do not. Your face sheet is an itemized list of your sentence structure, and includes details such as your mandatory release date, parole eligibility date, and sentence expiration date. You should always keep an updated copy of your face sheet.

The actual time you serve in prison depends on many different factors. These factors are listed on your face sheet and are computed into your sentence. Therefore, it is very important for you to read your face sheet, know what is included in it, and understand how the DC Department of Corrections computes your sentence. For example, although you and your bunkmate are both sentenced to prison for 5 to 15 years, you may actually serve different amounts of time in prison. The difference in treatment may stem from the many factors that affect sentence computation, such as mandatory minimum sentences, concurrent and consecutive sentences, the Emergency Powers Act, and the Good Time Credits Act.

This chapter provides information on the different elements that are considered in computing sentences. It discusses your face sheet, the Emergency Powers Act, institutional and educational good time, street time, and jail time. Because sentence computation is very complicated, this chapter provides examples in boxes after each discussion. If you have unanswered questions or need further information, contact the records office at your facility or any of the organizations listed at the end of this chapter.

YOUR FACE SHEET

Upon entering the correctional facility, you should be provided with a face sheet which details the time you will be under the jurisdiction of the DC Department of Corrections. Your face sheet will list the length of your sentence along with the factors that affect your sentence. These include your parole eligibility date, your mandatory release date, jail time credit, street time credit, and any good time credits.

Your case manager should explain your face sheet to you. Be sure to ask questions if you do not understand something. Frequently, many DC Department of Corrections employees do not understand or know the proper procedures for calculating your sentence. Because it is a very complicated process, errors are made routinely. In fact, prisoners are frequently given face sheets that contain incorrect information. Sometimes they are not provided with a face sheet at all. If you are not provided with your face sheet, you can request a copy from your case manager or the records office at your facility.

Be sure to get a copy of your face sheet and check it for accuracy. The records office must recalculate your face sheet every time you receive educational good time credits. Check your face sheet after you complete every program to ensure that you receive any good time credit to which you are entitled.

EMERGENCY POWERS ACT

The Emergency Powers Act ("EPA") was enacted to reduce the overcrowding of DC prisons. Therefore, whenever the population of the prison system exceeds capacity for 30 consecutive days, the DC Department of Corrections must ask the Mayor to declare a state of emergency in the prisons. If a state of emergency is declared, the Mayor must reduce the minimum sentences of all eligible prisoners by 90 days and reduce the maximum sentences of all eligible prisoners by 90 days or 10% of the maximum sentence, whichever is less. Each eligible prisoner can receive up to two sentence reductions under a single declaration of a state of emergency in the prison system. For example, if the Mayor declares today that

there is an emergency, you can only have your sentence reduced twice under that state of emergency. However, if another state of emergency is declared at a later date, you may have your sentence reduced at that time as long as you are eligible for the sentence reduction.

Eligibility

All prisoners under the jurisdiction of the DC Department of Corrections are eligible for reductions of their minimum and maximum sentences under the EPA unless the following restrictions apply. Even if you start serving your sentence during a declared state of emergency, you are eligible for sentence reduction unless the following restrictions apply to you.

- You cannot have your minimum sentence reduced if you have more than 180 days remaining on your minimum sentence;
- You cannot have your maximum or minimum sentence reduced
  - ❑ if you are serving a sentence of life imprisonment;
  - ❑ if you are serving a sentence for committing the following crimes: murder in the first and second degree (including felony murder), manslaughter, negligent homicide, attempted murder, rape, carnal knowledge, indecent acts with children, attempted rape, assault with intent to rape, attempted carnal knowledge, robbery, assault with intent to commit robbery, armed robbery, assault with intent to commit any felony, assault with intent to kill, assault with intent to murder, mayhem or malicious disfigurement, assault on a police officer, assault with intent to commit mayhem, first degree burglary, arson, incest, sodomy, attempted sodomy, extortion, kidnapping, any crime of violence committed while armed, and cruelty to children
  - ❑ if you have a mandatory minimum sentence under the DC Mandatory Minimum Sentences Initiative of 1981;
  - ❑ if you were sentenced under the Federal Youth Corrections Act or the District of Columbia Youth Rehabilitation Act, unless your mandatory release date is within 180 days of the date the emergency was declared; or
  - ❑ if you were denied parole or your parole determination was "continued" on your current sentence, unless your remaining maximum sentence is within 180 days of the date the emergency is declared.

How it Works

If you are eligible for sentence reduction under the EPA, your new parole eligibility date or mandatory release date should be re–computed within 24 hours of a state of emergency declaration. Your minimum sentence should be reduced by 90 days and your maximum sentence should be reduced by 90 days or 10% of your sentence, whichever is less. All sentence reductions should be documented on your face sheet. After your reductions are computed and documented on your face sheet, you may be eligible for parole or even mandatory release. If you are eligible for parole due to a sentence reduction under the EPA, your case manager should provide necessary documents to the Parole Board. Also, if you are eligible for release to the community (to "expirate") as a result of the EPA, then your case manager should prepare the documents necessary to facilitate your release.

DC GOOD TIME CREDITS ACT OF 1986

Under the DC Good Time Credits Act of 1986, an eligible prisoner can have "good time credits" applied to her sentence to reduce the time she serves in prison. "Good time credits" are exactly that — you get credit for the time you serve in the facility as a "good" prisoner. In other words, if you meet the eligibility requirements and comply with the rules and regulations of the prison, you should receive good time credits and reduce the time you must serve.

There are two types of good time credits: "institutional good time" and "educational good time credits." Both institutional and educational good time credits are applied to your maximum and minimum sentences to reduce the time you actually serve in prison. As long as you meet the eligibility requirements, you can receive both institutional and educational good time credits.

Because you receive good time credits for overall "good" behavior, they are not guaranteed, even if you are eligible to receive them. For example, even if you have successfully completed an educational program and are eligible to receive educational good time credits, you may not be awarded the good time credits if your institutional record shows that you have been found guilty of a Class I or Class II offense during the course of your educational program. Additionally, your institutional good time credits can be taken away if your institutional record shows that you are not complying with the rules and regulations of the prison. There are some Class I or Class II offenses that require your institutional good time credit to be taken away. If your institutional good time credits are taken away, you are said to have "forfeited" your institutional good time credits.

Institutional Good Time Credits

Institutional good time credit ("IGTC") days are awarded according to the rate established by the DC Good Time Credits Act of 1986. IGTC is applied to both minimum and maximum terms of your sentence unless you are serving a mandatory minimum sentence. Institutional good time applied to your minimum sentence affects your parole eligibility date, while institutional good time applied to your maximum sentence affects your mandatory release date.

Unfortunately, the "Truth in Sentencing Act" of 1994 eliminates institutional good time credits for prisoners who committed offenses on or after June 22, 1994. This means that if you committed your offense on or after June 22, 1994, you cannot have institutional good time credits applied to either your minimum or maximum sentence.

Eligibility

Any prisoner who meets the following conditions is eligible to receive institutional good time credits:

- was convicted in a DC Court for violating the DC Criminal Code;
- is serving a sentence for an offense that occurred before June 22, 1994; If you were sentenced prior to April 11, 1987, but are still serving time after April 11, 1987, you will receive institutional good time credit for the remaining portion of your sentence beginning on April 11, 1987.
- was not convicted of first degree murder; and
- does not have a mandatory minimum sentence. If you have a mandatory minimum sentence, you cannot have institutional good time credits applied to the portion of your minimum sentence that is mandatory.

However, you can have it applied to your maximum sentence.

Calculating Institutional Good Time Credit Days

The total sum of all your possible IGTC will be awarded when you begin serving your sentence. In other words, the prison administration assumes that you will have no problems during your incarceration and that you will receive and keep all of your IGTC days. By awarding you the total sum at the beginning, your parole eligibility date and mandatory release date can be projected. You should note, however, that although your IGTC days are awarded as you begin serving your sentence, they can be taken away (forfeited). Therefore, your parole eligibility date and mandatory release date may change if you forfeit your IGTC days.

- **Determining Your Institutional Good Time Credit Days**

  IGTC days will be computed based on a set rate of days per year. Use the chart below to calculate the number of IGTC days for which you are eligible.

If your sentence is...	you will receive...
between 30 days and 1 year	5 IGTC days per month
more than 1 year and less than 3 years	6 IGTC days per month
3 years or more but less than 5 years	7 IGTC days per month
5 years or more but less than 10 years	8 IGTC days per month
10 years or more	10 IGTC days per month

- **Separating Your Minimum and Maximum Sentences**

  You must calculate your IGTC days separately for the minimum and maximum terms of your sentence.

EXAMPLE 2.1

- ❑ You are sentenced to 5 to 15 years.
- ❑ According to the chart above, you are eligible for 8 IGTC days per month for a 5 year sentence.
- ❑ Deduct 480 days from your 5 year minimum term sentence.

  8 IGTC days per month
  x 12 months per year
  x 5 years
  = 480 IGTC days

- ❑ Follow the same steps to calculate the number of IGTC days you can deduct from your maximum term sentence. Because your maximum term sentence is 15 years, you should deduct 10 IGTC days per month for a total of 1800 IGTC days.

  10 IGTC days per month
  x 12 months per year
  x 15 years
  = 1800 IGTC days deducted from your 15 years maximum sentence

- **Consecutive Sentences**

  If you have two or more "consecutive sentences" (if you are serving one sentence followed by another), you should add all the consecutive sentences together and use the total sum of years to calculate the IGTC days you should receive. Add only the sentences you have for DC Criminal Code violations because IGTC days do not apply to sentences for other state or federal criminal code violations.

EXAMPLE 22

- You are serving three consecutive sentences. Count I carries a sentence of 5 to 15 years (DC Criminal Code Violation); Count II carries a sentence of 3 to 9 years (DC Criminal Code Violation); Count III carries a sentence of 2 to 6 years (Federal Criminal Code Violation).

- Add all the consecutive sentences you are serving for violations of the DC Criminal Code. [Count I (5 to 15 years) + Count II (3 to 9 years) = (8 to 24 years)] Do not consider the 2 to 6 years you received for Count III because it is not a DC Criminal Code violation.

- Once you know the minimum and maximum terms of your sentence (8 to 24 years), follow the steps outlined above in the previous section entitled "Separate the Minimum and Maximum Sentences" to calculate the number of IGTC days for which you are eligible.

  from your minimum sentence of 8 years...

  8 IGTC days/month
  x 12 months/year x 8 years
  = 768 IGTC days

  from your maximum sentence of 24 years...

  10 IGTC days/month
  x 12 months/year x 24 years
  = 2,880 IFTC days

- Therefore, you should deduct 768 IGTC days from your minimum sentence of 8 years and 2,880 days from your maximum sentence of 24 years.

  Your total minimum term DC sentence is...

  2,290 days (8 years)
  – 768 IGTC days
  = 2,152 days

  Your total maximum term DC sentence is...

  8,760 days (24 years)
  – 2,880 IGTC days
  = 5,880 days

- Add the federal sentence to your newly computed minimum and maximum term sentences to arrive at the final number of years you will serve.

- **Concurrent Sentences**

  If you have two or more "concurrent sentences" (if you are serving more than one sentence at the same time), your IGTC days will be calculated based on your aggregate minimum and maximum sentences. Once again, only use the sentences that you received for violations of the DC Criminal Code.

EXAMPLE 2.3

- ❑ You are serving two concurrent sentences that were imposed on the same day. Count I carries a sentence of 5 to 15 years; Count II carries a sentence of 3 to 9 years.
- ❑ Use 5 to 15 years to calculate your IGTC days because it is your longest sentence for a DC Criminal Code violation and it basically absorbs the 3-9 year sentence.
- ❑ Using the steps outlined in the previous sections, deduct 480 IGTC days from your minimum sentence and 1800 IGTC days from your maximum sentence.

  from your minimum sentence of 5 years...

  8 IGTC days/month
  x 12 months/year x 5 years
  = 480 IGTC days

  from your maximum sentence of 15 years...

  10 IGTC days/month
  x 12 months/year
  x 15 years
  = 1800 IGTC days

Parole Eligibility and Mandatory Release Dates

Both your parole eligibility date and mandatory release date are affected by IGTC. If you follow all the steps outlined in the previous section entitled "Calculating Institutional Good Time Credit Days," you should arrive at your projected parole eligibility and mandatory release dates. Although it may be time consuming and tedious, you should try to determine these dates so that you can check your face sheet for accuracy.

- **Parole Eligibility**

  Your projected parole eligibility date is the date when you are eligible for parole. It is determined by deducting your IGTC days from your minimum term sentence. If your sentence carries a mandatory minimum sentence, you are not eligible for parole until you have served the full mandatory portion of your minimum sentence. You should note that this is your projected parole eligibility date. If EPA and educational good time credits are applied to your sentence, you will have an earlier parole eligibility date (however, these cannot be applied to the mandatory minimum portion of your sentence). If you are found guilty of any Class I or Class II offense, you may forfeit your good time, and your parole eligibility date will be delayed. In addition, the "Truth in Sentencing Act" of 1994 states that if you were convicted of a crime of violence or one involving the possession, sale, transfer or use of guns or other dangerous weapons, you cannot be paroled prior to serving 85% of your minimum sentence (providing you have already served any mandatory minimum sentence). (See Chapter IX, "Surviving the Parole Process".)

EXAMPLE 24

- Janet Johnson was sentenced January 1, 1994 to 6 to 18 years for committing a non-violent offense. This is her first time in prison and she does not have any other sentences to serve.

- Use her minimum term sentence of 6 years to calculate her parole eligibility date. Since Janet has a minimum term sentence of 6 years, she is eligible to deduct 8 IGTC days per month for a total of 576 IGTC days from her minimum term sentence.

- After her IGTC days are deducted from her minimum term sentence, she is eligible for parole 4 years and 154 days (or 1614 days) from her date of sentencing.

  365 days per year
  x 6 years
  = 2190 days (full minimum term sentence)

  2190 days
  – 576 IGTC days
  = 1614 days (or 4 years and 154 days)

EXAMPLE 25

- Janet Johnson was sentenced January1, 1994 to 6 to 18 years. This is her first time in prison and she does not have any other sentences to serve.

- Use her maximum term sentence of 18 years to calculate her mandatory release date. Since Janet has a maximum sentence of 18 years, she is eligible to deduct 10 IGTC days per month for a total of 2,160 IGTC days from her maximum term sentence.

  10 days/month
  x 12 months/year
  x 18 years
  = 2160 IGTC days (see previous section, "Calculating Institutional Good Time Credit Days" to see how to arrive at this number.)

- After her IGTC days are deducted from her maximum term sentence, she is eligible for mandatory release 12 years and 30 days from her date of sentencing.

  365 days/year
  x 18 years
  = 6570 days
  (full maximum term sentence)

  6570 days
  – 2160 IGTC days
  = 4410 days (or 12 years and 30 days)

- **Mandatory Release Dates**

When you deduct your IGTC days from your maximum term sentence, you arrive at your projected mandatory release date. Even if you have a mandatory minimum sentence, you can get IGTC days deducted from your maximum term sentence. Once again, you should note that this is how you calculate your projected mandatory release date. The same factors that affect your projected parole eligibility date may affect your projected mandatory release date as well.

- **Forfeiture of Institutional Good Time Credit**

Although your IGTC days are awarded to you at the beginning of your incarceration, the IGTC days may be taken away from you. There are some circumstances that require a mandatory forfeiture of your IGTC. However, in most cases, the Director has the authority to decide whether your IGTC days should be forfeited. Forfeiture of your IGTC depends on whether or not

you are found guilty of one or more Class I or Class II offenses. Therefore, your best protection against losing your IGTC is to avoid being charged with a violation of a Class I or Class II offense. If you are charged, however, you should do your best to defend yourself so that you are not found guilty. For a discussion on defending yourself against a disciplinary report, read Chapter V, "Disciplinary Reports."

- **Mandatory Forfeiture of IGTC**

If you are found guilty of one or more of the Class I offenses listed below, you will forfeit at least 50% of the IGTC days credited toward your minimum term sentence. Consequently, your parole eligibility date will be postponed.

EXAMPLE 2.6

- ❑ You are serving a sentence of 5 to 15 years.
- ❑ You were awarded 480 IGTC days for your minimum sentence of 5 years.
- ❑ You were charged and found guilty of escape.
- ❑ You forfeit at least 240 IGTC days from your minimum sentence, and your parole eligibility date is delayed by 240 days.

The Class I offenses that call for mandatory forfeiture of IGTC from your minimum sentence are:

- ❑ Murder
- ❑ Manslaughter
- ❑ Kidnapping
- ❑ Armed Robbery
- ❑ Assault
- ❑ Forcible Sexual Assault
- ❑ Arson
- ❑ Escape
- ❑ Engaging in a Riot
- ❑ Inciting a Riot

- **Discretionary Forfeiture of IGTC**

If you are found guilty of any of the above listed offenses, you automatically forfeit your IGTC days credited toward your minimum sentence. However, there are some violations for which you do not automatically forfeit your IGTC. If you fall under any of the three categories listed below, the Director of the DC Department of Corrections has the authority to decide whether or not you will forfeit your IGTC. In other words, the Director "exercises her discretion" with regard to your IGTC forfeiture. The Director also decides the amount of IGTC you will forfeit.

When the Director is deciding on your IGTC forfeiture, she will consider the following factors:

- ❑ the circumstances surrounding the violation;
- ❑ the severity of the violation;
- ❑ your disciplinary record; and
- ❑ your conduct and behavior (for example, have you taken any courses? have you participated in any programs?)

Once you have been found guilty of an offense, you have very little control over whether or not your IGTC days are forfeited. Although you can appeal the Director's decision to forfeit your IGTC, you do not have much input into the Director's decision to take away your IGTC. Therefore, your best tactic is to defend yourself in disciplinary report hearings. The Director will have access to the records of your disciplinary report hearing and will use those records to decide whether your IGTC days should be forfeited. Therefore, you should point out any circumstances that may explain your actions during the hearing. Furthermore, you should highlight any positive aspects of your institutional record such as your participation in programs.

Class I Offenses and Maximum Term Sentences

If you are found guilty of one or more of the Class I offenses listed below, your IGTC days that were credited toward your minimum term sentence will automatically be taken away, as described above. However, your IGTC days credited toward your maximum term sentence may or may not be forfeited. If you are found guilty of one of the Class I offenses listed below, the Director of the DC Department of Corrections has the authority to decide whether or not your IGTC days credited toward your maximum sentence should be forfeited. If the Director decides that you should lose the IGTC days credited toward your maximum term sentence, she will also decide the percentage of IGTC days to be forfeited. You cannot forfeit more than 50% of your IGTC days from your maximum term sentence.

EXAMPLE 2.7

- ❑ You are serving a sentence of 5 to 15 years.
- ❑ At the beginning of your incarceration, 480 IGTC days were credited toward your minimum term sentence of 5 years and 1800 IGTC days toward your maximum term sentence of 15 years.
- ❑ You are charged and found guilty of escape.
- ❑ Escape is an offense that requires you to forfeit at least 50% of the IGTC days credited toward your minimum sentence. (See previous section, "Mandatory Forfeiture of IGTC.")
- ❑ You forfeit 240 IGTC days with regard to your minimum term sentence.
- ❑ The Director may or may not decide that you should forfeit your IGTC days credited toward your maximum term sentence. If the Director decides that you should forfeit those IGTC days, she will also decide the percentage of IGTC days that should be forfeited.

The Class I offenses that may require forfeiture of IGTC days credited toward your maximum sentence are:

- ❑ Murder
- ❑ Manslaughter
- ❑ Kidnapping
- ❑ Armed Robbery
- ❑ Assault
- ❑ Forcible Sexual Assault
- ❑ Arson
- ❑ Escape
- ❑ Engaging in a Riot
- ❑ Inciting to Riot

Class I Offenses and Minimum Term Sentences

If you are found guilty of one or more of the following Class I offenses, you may forfeit up to 50% of your IGTC days credited toward your minimum term sentence. Additionally, if you no longer have a minimum term sentence (if you have served your minimum term and are now waiting for parole or to complete your maximum term), you may forfeit up to 50% of your IGTC days credited toward your maximum term sentence. The Director has the power, in each situation, to decide whether your IGTC days should or should not be forfeited. The relevant Class I offenses for forfeiture under this section are:

- ❑ Major Contraband
- ❑ Theft
- ❑ Restraint
- ❑ Receiving Stolen Property
- ❑ Tampering with a Witness or Informant
- ❑ Damage or Destruction of Property
- ❑ Bribery
- ❑ Forgery and Tampering

Class II Offenses and Maximum and Minimum Sentences

If you are charged with and found guilty of one or more of the Class II offenses, you may forfeit up to 30% of the IGTC days credited toward your minimum as well as maximum sentences.

Appeal of IGTC Forfeiture

If you believe that the Director's decision to forfeit your IGTC was inappropriate or unjust, you can appeal her decision. Although this section will focus on appealing IGTC forfeitures, you can use these procedures to appeal the Director's decisions regarding "good time" credits, including decisions to delay, restore, grant, withhold, or cancel your institutional or educational good time credits.

In order to appeal the Director's decision to forfeit your IGTC, you must submit a written notice of appeal to the Director within ten calendar days (Saturdays, Sundays and holidays included) after receiving a copy of the Director's decision. In the notice of appeal, you should state why you think the forfeiture was arbitrary, unjust, unfair, wrong or harsh. Even if the ten days have expired, submit a written notice of appeal that also states why you are late. If you show "good cause" for your delay, then the 10 day time limit may be extended.

Once you submit this notice of appeal, the Director must hand over any relevant institutional records to the Institutional Appeals Board. If you and/or the Director have any relevant materials that you wish to submit to the Board, you must do so within 15 calendar days of submitting the notice of appeal. For example, you may want to submit a written affidavit (a notarized, sworn statement) from a supporting character witness stating why your IGTC should not be forfeited. To better your chances at a successful appeal, you should submit as many supporting documents as possible. If you have statements from witnesses that can help your case, especially statements by DC Department of Corrections employees, you should submit that into the record. The Board may also ask you to submit additional statements or materials. The Board has the power to affirm, reverse, or modify the Director's decision. The Board may also send the appeal to the Director for her to reconsider her decision. In reaching a decision, the Board will review all the documents that have been submitted into the record. The Board will affirm the Director's decision unless it finds that:

- the Director's decision was "arbitrary and capricious;"
  In other words, there is no legitimate reason for the Director's decision and she made the decision without giving the matter much thought.
- the Director abused her discretion;
- the procedures were not properly followed; or
- the law was not properly applied.

The Board's decision is final and you cannot appeal the matter any further.

Applying for Restoration of IGTC

If your appeal of the Director's decision to forfeit your IGTC is unsuccessful, you can apply to restore your forfeited IGTC. You can also apply to restore your forfeited IGTC instead of appealing the Director's decision to forfeit your IGTC. However, you cannot restore your forfeited IGTC if the forfeiture was mandatory. (See previous section, "Mandatory Forfeiture of IGTC" for more information.) You can submit an application to restore your forfeited IGTC by writing a letter, as long as you have not been found guilty of any Class I or Class II offense during the twelve months immediately prior to your application. In other words, the earliest you can apply for restoration of your forfeited IGTC is twelve months after your forfeiture as long as you have not been found guilty of any Class I or Class II offense since your forfeiture.

You should submit your application to the Classification Committee ("Committee") at your institution. The Committee has the authority to review your application and make a recommendation to the Director, and can recommend that all or part of your forfeited IGTC be restored.

When making its recommendation, the Committee will consider the following factors:

- the circumstances surrounding the violation;
- the severity of the violation;
- your disciplinary record;
- your conduct and behavior (for example, have you taken any courses? have you participated in any programs?); and
- your positive adjustment since the violation and forfeiture occurred.

If you are not satisfied with the Director's decision regarding your application to restore forfeited IGTC, you can appeal the decision to the Institutional Appeals Board. Follow the same procedures detailed above in the section entitled "Appeal of IGTC Forfeiture."

Educational Good Time Credit

In addition to the institutional good time credit, you may receive educational good time credit. Educational good time credit ("EGTC") is similar to the institutional good time credit in that it is applied to your minimum and maximum term sentences to determine your parole eligibility date and mandatory release date. However, EGTC is awarded for completion of academic or vocational programs such as Street Law, Graduate Equivalency Degree ("GED") preparation course, Adult Basic Education ("ABE") and apprenticeship programs. You can receive both EGTC and IGTC as long as you meet the requirements for each.

Eligibility

Any prisoner who meets the following conditions is eligible to receive educational good time credits:

- was convicted in a DC Court for a violation of a DC Criminal Code;
- was not convicted of first degree murder;
- does not have a mandatory minimum sentence;

  If you have a mandatory minimum sentence, you cannot have EGTC days applied to the mandatory minimum portion of your sentence, but EGTC days can be applied to your maximum sentence.

- was enrolled in a course or program on or after April 11, 1987;

  If you were enrolled in a program prior to April 11, 1987, but did not complete the program until after that date, you will receive EGTC for the days you were enrolled in the program on or after April 11, 1987.

- successfully completed the course or program; and
- was not found guilty of a Class I or Class II offense during the course of the program.

How Educational Good Time Credit Works

- **Rates of Educational Good Time Credit Days**

EGTC is awarded according to rates determined by the DC Department of Corrections. You can receive 3 – 5 EGTC days per month depending on the type of program or course you complete. A list of the EGTC rates is provided at the end of this chapter. You can also get this information

in your law library under Section 604.5 of Title 28 of the DC Municipal Regulations (28DCMR 604.5). In addition to setting the number of EGTC days per month you can receive, the Department of Corrections has also set a maximum number of months for which you can receive credit for any particular program.

If you were convicted of a crime of violence or a crime involving the possession, sale, transfer, or use of guns or other dangerous weapons after June 22, 1994, your total educational and meritorious good time credits cannot reduce your sentence by more than 15%.

EXAMPLE 2.8

- ❑ You are enrolled in a GED preparation course on January 1, 1993.
- ❑ You are eligible for 5 EGTC days per month for completing a GED preparation course.
- ❑ Although the DC Department of Corrections has determined that it normally takes 15 months to complete the course, you take 17 months to complete it.
- ❑ You receive 75 EGTC days (5 EGTC days per month for 15 months), because it normally takes 15 months to complete the course;
- ❑ If you were enrolled in the GED preparation course after April 11, 1987, 75 EGTC days will be applied to your minimum and maximum sentences as long as you were not found guilty of a Class I or Class II offense while enrolled in the course.

- **The Process**

When you successfully complete a course or program, an appropriate Educational Services official (such as a teacher) must issue a certificate verifying that you have completed the program or course. The certificate is then forwarded to the Administrator of your facility who is responsible for applying the EGTC days to reduce your minimum and maximum sentences. The administrator must also ensure that your record is reviewed by the institutional Classification Committee if the award of EGTC will make you immediately eligible for parole or mandatory release.

- **Delay or Withholding of EGTC**

Once EGTC is granted, it cannot be forfeited. However, the awarding of your EGTC may be delayed or permanently withheld if you were found guilty of a Class I or Class II offense while enrolled in the course or program. If you do fall into this category, the Administrator of your facility will forward your case to the Classification Committee for a recommendation on whether to reward, delay, or permanently withhold your EGTC. When the Classification Committee receives your case, it will consider the following factors:

- ❑ the severity of the offense;
- ❑ the circumstances surrounding the offense;
- ❑ your disciplinary record;
- ❑ your conduct and behavior; and
- ❑ your positive adjustment since the violation.

Once the Classification Committee reaches a decision, it will forward its recommendation to the Director for a final decision. If you are not satisfied with the Director's decision, you may appeal it. (See previous section, "Appeal of IGTC Forfeiture," for information on appealing a delay or withholding of your EGTC.)

Meritorious Good Time Credits

The "Truth in Sentencing Act" of 1994 created a new type of good time credit called "meritorious good time credits." These credits can be awarded at the discretion of the Department of Corrections to prisoners who perform an exceptional service of tremendous importance to the prison operations. For example, the Director may decide to reward a prisoner with good time credits for saving another prisoner from a burning building. These credits are extremely difficult to get — you must do something truly outstanding, and it is still up to the Director to decide whether or not you should receive the credits. If you are awarded meritorious good time credits, they will be applied to both your minimum and maximum term sentences. If you were convicted of a crime of violence or a crime involving the possession sale, transfer or use of guns or other dangerous weapons, you cannot have your sentence reduced by more than 15 percent.

STREET TIME AND JAIL TIME

Street time becomes a factor in your sentence computation if you have violated parole or are re–incarcerated on a new charge. Under District of Columbia law, you must be given credit for the time you served on parole prior to the issuance of a parole warrant ("street time") and for the time you spent in custody awaiting your trial, sentencing, or parole revocation hearing ("jail time"). All of your jail time will be counted as part of the time you have served to satisfy your sentence and will be credited toward your maximum and minimum sentences. Your street time will be counted as part of the time you have served to satisfy your sentence and will be credited toward your maximum term sentence.

How it Works

If you were paroled on or after April 11, 1987, and you have violated parole or are re-incarcerated due to a new charge, you will receive street time credit for all of the time you were "on the streets" until a parole warrant was issued. If you were paroled before April 11, 1987, and were re–arrested, or if an arrest warrant was issued after April 11, 1987, you will be credited with street time only for the length of time between April 11, 1987, and the date your warrant was issued. Additionally, if you are returned to custody due to a new charge and a parole warrant is lodged as a detainer, and if the new charge is dismissed or you are found not guilty, the time you spent in custody ("jail time") will be credited toward your back-up time.

When a warrant is issued for your re–arrest, your street time is "tolled." This means that the time you spend on parole or out of custody that would be credited toward your sentence stops accumulating as soon as a warrant is issued. Whether you are credited street time for the time you are "on the street" between the issuance of the warrant and execution of the warrant (when they bring you back into custody under the warrant) depends on whether your parole is revoked. For instance, if your warrant is issued on January 1, 1993, and you are re–arrested on July 1, 1993, the six months you were on the street (from January 1, 1993 to July 1, 1993) may or may not be credited toward your sentence depending on the decision of the Parole Board.

After a parole warrant is executed, the Parole Board will hold a "revocation hearing" within 90 days to determine whether or not to revoke parole. If the Parole Board decides to revoke your parole, the time between the issuance of your warrant and the execution of the warrant will not be credited toward you sentence. However, if the Parole Board decides not to revoke your parole, the time between the issuance of your warrant and the execution of the warrant will be credited toward the service of your sentence.

EXAMPLE 2.9

- ❑ You were sentenced to serve 8 to 24 years. Your minimum term sentence of 8 years was a mandatory minimum sentence.
- ❑ You were paroled and released to the community on parole after serving your 8 year mandatory minimum sentence on January 11, 1987.

  Since you served your minimum term, you still owe the DC Department of Corrections 16 years (less good time) to satisfy your full term of 24 years.
- ❑ During a routine parole and urine screen, you tested positive for opiates and a warrant was issued on April 11, 1990.
- ❑ You were arrested on the parole warrant on April 11, 1993.
- ❑ You go before the Parole Board on July 11, 1993, and they revoke your parole.
- ❑ You get street time for 3 years (from April 11, 1987 to April 11, 1990).

  Although you were "on the streets" from January 11, 1987 to April 11, 1993, you only get credit from April 11, 1987 to April 11, 1990.

  You do not get credit for the time between April 11, 1990 and April 11, 1993 because your street time was "tolled" when the parole warrant was issued on April 11, 1990.
- ❑ You also receive credit for the 3 months you spent in jail waiting to see the Parole Board (from April 11, 1993 to July 11, 1993).

CONCLUSION

As you can see, knowing how to compute your sentence is very important. Factors such as your good time credits may actually reduce the time you spend in prison. If you do not know how to compute your sentence, you may not discover inaccuracies on your face sheet. As a result, you may serve a longer sentence than you should. If you think there is an error on your face sheet, or if you have further questions about sentence computation, you should speak to your facility's records office, your case manager, or contact one of the organizations listed below.

ORGANIZATIONS TO CONTACT

Bill Earhart
Attorney Advisor
Legal Assistance Branch
DC Superior Court
515 5th Street, NW, Room 101
Washington, DC 20001
(202) 879–2833

Prisoners' Rights Program
DC Public Defender Service
P.O. Box 47
Lorton, Virginia 22079
(703) 643–1034
(202) 628-1200

D.C. Prisoners' Legal Services Project
1400 20th Street, NW
Suite 117
Washington, DC 20036
(202) 775–0323

National Women's Law Center
Women in Prison Project
11 Dupont Circle, NW
Suite 800
Washington, DC 20036
(202) 588-5180

REFERENCES

Emergency Powers Act, D.C. Code §24–901 et seq.

Institutional Good Time Credit, see D.C. Code §24–428

Educational Good Time Credit, see D.C. Code §24–429

Jail Credit, see D.C. Code §24–431

RATES OF EDUCATIONAL GOOD TIME CREDIT

Course/Program	Normal Completion Time	Rate	Maximum Allowable Credits
Academic			
Adult Basic Education	15 Mos	5 Days per Month	75 Days
GED Preparation	15 Mos	5 Days per Month	75 Days
ETAP (Employment)	1 Mo	3 Days per Month	3 Days
Related Programs	1–6 Mos	3 Days per Month	18 Days
Vocational			
Vocational	8 Mos	4 Days per Month	32 Days
Vocational	15 Mos	5 Days per Month	75 Days
Vocational	22 Mos	5 Days per Month	110 Days
Apprenticeship			
Apprenticeship	15 Mos	5 Days per Month	75 Days
Apprenticeship	30 Mos	5 Days per Month	150 Days
Apprenticeship	45 Mos	5 Days per Month	225 Days
Apprenticeship	60 Mos	5 Days per Month	300 Days
Higher Education* (Full-time Student)			
15 Semester Hours	6 Mos	3 Days per Month	18 Days
30 Semester Hours	12 Mos	4 Days per Month	48 Days
Associate Degree	24 Mos	5 Days per Month	120 Days
Bachelor Degree	52 Mos	5 Days per Month	260 Days
Higher Education (Part-time Student)			
3 Semester Hours	4 Mos	3 Days per Course Unit	3 Days x No. of Course Units
Special Education**			
1–12 Months		3–4 Days per Month	48 Days

* Educational good time credits awarded for completing Higher Education Semester hours shall not be cumulative. For example, a prisoner shall receive 18 days of credit after successfully completing the first 15 semester hours. If a prisoner obtains an additional 15 credit hours for a total of 30 semester hours, an additional 30 days shall be credited for a total credit of 48 days.
** Educational good time credits shall be awarded to special education students annually, based upon successful attainment of each objective outlined yearly in the individualized education plan.

III. RELIGIOUS PRACTICE

INTRODUCTION

The First Amendment of the United States Constitution protects your individual right to worship or believe in the religion of your choice. This protection exists regardless of whether you are in the community or in prison. While you are in the community, your First Amendment right to freedom of religion is very broad. It can only be restricted when practicing your religious beliefs conflicts with an important governmental interest. For example, people have been prohibited from sacrificing animals as a means of religious expression because this practice endangers the public health.

In prison, your First Amendment right to exercise your religion is more restricted than in the community because the government's interest in maintaining prison order and security is very strong. Although the prison must provide you with reasonable opportunities to practice your religion, your right can be restricted by prison policies which are reasonably related to a legitimate interest of the prison. For instance, the United States Supreme Court found that a prison administration did not violate Muslim prisoners' First Amendment rights when it refused to transport them back from work detail to the main facility in time to observe Jumah on Friday afternoons. Therefore, although the First Amendment allows you to believe in any religion, your freedom to act on those beliefs may be restricted in prison if the government has an important interest in doing so.

To prove a violation of the First Amendment right to freely exercise your religion, you must demonstrate that your religious practices can be accommodated without negatively affecting the operation of the prison facility or other legitimate concerns of the Department of Corrections. Some examples of legitimate concerns of the DC Department of Corrections are: (a) security of other prisoners; (b) security of the guards and other staff; (c) health standards; and (d) operation of the prison facility.

The First Amendment also prohibits the government from favoring one religion over another. The government, therefore, cannot discriminate against you based on the religion you choose to practice. For example, if the DC Department of Corrections provides a worship place for Catholic prisoners, it must also provide a comparable worship place for Muslim prisoners.

This chapter summarizes the DC Department of Corrections' regulations concerning prisoners' rights to practice their religion while incarcerated. This chapter also describes general constitutional protections and limitations on prisoners' rights to freely exercise their religion. If you have any legal questions or if you believe your rights are being violated, contact the organizations listed at the end of this chapter.

YOUR RIGHTS

Worship Services and Religious Observances

One of the most important rights guaranteed by the First Amendment is the right to hold and attend religious services. At each of the DC Department of Corrections facilities, the Warden of that facility, along with the Staff Chaplain, should designate and provide a suitable place for all religious services. If you wish to place a request for religious services or an activity which brings together a variety of religions, submit your request to the Staff Chaplain.

Religious Leaders

Religious services can be conducted by the Staff Chaplain or a person that s/he designates to lead the service. Prisoners may also meet for prayer, study, and discussions without the Staff Chaplain or his/her designee as long as the meeting has been cleared with the Staff Chaplain and approved by the Warden of the facility. If you want to invite guest ministers or other religious speakers to conduct religious services, you should request the Staff Chaplain at your facility to make a recommendation to the Warden. The Warden must approve your request before your guest can be invited to the facility. You also have a right to contact a spiritual advisor through the prison mail system and personal visits. If your spiritual advisor plans to visit, you should have your case manager place your spiritual advisor's name on your visitors' list.

Observing Holidays

You have a right to observe your religion's holy days or holidays. You should alert your Staff Chaplain to your religion's upcoming holy days or holidays and inform him/her that you intend to observe the holy day or holiday. The DCDC Department Order 4410.1B specifies that your employer should excuse you from work on the religious holiday or holy day. If you are excused from work to observe a religious holiday, you can ask to reschedule it.

Your Right Not to Worship

Your right to freely exercise your religious beliefs includes your right not to worship. If there are services or meetings that you do not wish to attend, the DC Department of Corrections cannot force you to attend.

Religious Apparel and Symbols

You are permitted to wear religious apparel or use religious materials, such as robes, prayer shawls, and prayer rugs, during worship services. You may also keep these items in your possession as long as their use does not conflict with prison security or health standards. Additionally, religious symbols and medals can be worn at all times unless they are considered a security threat. For example, if your religious symbol is a dagger, the DC Department of Corrections can prohibit you from wearing it because it is a weapon.

Religious headgear can be worn at all times. However, the Staff Chaplain must verify and document that your religion requires you to wear the headgear. You may also wear religious apparel such as robes, shawls, and headgear, including turbans, kufis, and fezzes at all times unless it poses a security risk. For example, the DC Department of Corrections may prohibit you from wearing a fez except during worship service if it demonstrates that the fez poses a security risk because contraband can easily be carried under it. You can also grow your hair or facial hair, if required by your religion. You may be required to cover long hair or a beard while working to decrease the likelihood of a work-related injury or a health code violation.

Religious Literature

You are permitted to keep Bibles, Qur'ans, prayer books, and other religious literature and periodicals in reasonable quantity. If the DC Department of Corrections provides religious materials to one religious group, it must provide similar materials to the other groups. However, the DC Department of Corrections is not required to provide you with any religious materials so long as it does not provide any religious materials to other religious groups.

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Diet

If your religion requires you to have a special diet, the DC Department of Corrections should accommodate your needs. For example, if your religion prohibits you from eating pork, you should be allowed to abstain from eating pork. Alternative meals should be provided for you at all three meals. You should submit your request to your Staff Chaplain and have him/her make arrangements for you. Due to the large population of prisoners who do not eat pork, canteen trucks are required to stock non-perishable pork-free items at all institutions.

WHAT TO DO IF YOUR RIGHTS ARE VIOLATED

If you believe that your Constitutional right to religious freedom is violated, you should first talk to your Staff Chaplain. If that does not bring you satisfactory results, you should submit an Inmate Grievance Procedure form (see Chapter VI, "Dispute Resolution").

Organizations

D.C. Public Defender Service
Prisoners' Rights Program
P.O. Box 47
Lorton, Virginia 22199
(703) 643-1034
(202) 628-1200

American Civil Liberties Union of the
National Capital Area
1400 20th Street, NW
Suite 119
Washington, DC 20036
(202) 457-0800

American Civil Liberties Union
National Prison Project
1875 Connecticut Avenue, NW
Suite 410
Washington, DC 20009
(202) 234-4830

D.C. Prisoners' Legal Services Project
1400 20th Street, NW
Suite 117
Washington, DC 20036
(202) 775-0323

Legal References

- Department Order 4410.1B, dated October 15, 1991
- United States Constitution, First Amendment

IV. SEXUAL HARASSMENT AND SEXUAL ABUSE

INTRODUCTION

Sexual harassment is a problem for women in any setting, including the workplace, the home, and on the streets. However, it is a particular problem for women prisoners. Prison guards use sexual harassment to control and assert their power over women prisoners, either through demeaning remarks, offensive touching, or outright rape or sexual abuse. Women prisoners experience harassment at the hands of not only prison guards, but male prisoners as well. Sexual harassment occurs in the Department of Corrections despite the "zero tolerance" prison policy which **strictly forbids** sexual contact between prisoners and staff, or between prisoners.

While it is generally difficult for women to take action against their harassers, it is especially difficult for women prisoners to take action against prison guards who harass them. Many women fear that prison guards or other DCDC personnel will retaliate against them for reporting the harassment. In the past, the DCDC did not readily admit that sexual harassment was a problem. Now, however, it **must** address prisoners' complaints of sexual harassment due to a recent victory in a lawsuit filed by the National Women's Law Center and Covington & Burling. The lawsuit, *Women Prisoners of the District of Columbia Department of Corrections v. District of Columbia*, brought on behalf of all women prisoners in the DC Department of Corrections, challenged the widespread sexual harassment and abuse of women prisoners in the DC Department of Corrections. In December of 1994, Judge June Green found for the women prisoners, and ordered the DC Department of Corrections to promptly investigate all future complaints of sexual harassment, and to take actions to prevent sexual misconduct in the DC Department of Corrections.

Many women prisoners who are sexually harassed feel powerless in the face of their harasser. However, if you have been sexually harassed or assaulted during your incarceration, there are a number of steps you can take. This chapter defines sexual harassment, and outlines the steps you can take if you have been sexually harassed.

DEFINING SEXUAL HARASSMENT

Although most people think of sexual harassment as unwelcome and inappropriate sexual conduct, including comments or touching, there are other inappropriate behaviors that are common in prison which constitute sexual harassment. For example, guards often harass women prisoners by invading their privacy and walking in on them unannounced while the women are dressing, bathing, or using the restroom. They may touch women inappropriately during pat-downs or body cavity searches, or make them submit to such searches when they are unnecessary. In addition, guards may harass women prisoners by offering them favors in exchange for sexual contact. The most severe forms of sexual harassment involve sexual assault, including rape. **Sexual assault is a crime, and can be prosecuted under the law.**

Sexual harassment occurs for different reasons. Some guards sexually harass and abuse women prisoners in order to humiliate, intimidate and punish them. In this way, it is used to control women prisoners. Other guards take advantage of the vulnerable position that women prisoners are in, and exploit their power in order to fulfill their own sexual desires. Although sexual harassment is largely a problem of men harassing women, women can also sexually harass other women. Women prisoners have reported being harassed by female as well as male officers.

Women prisoners have also been sexually harassed by male prisoners. Some women prisoners have reported being verbally harassed, and even sexually assaulted, by male prisoners while on work detail. Women prisoners have also been verbally harassed by male prisoners while being escorted in the prison system, for example, walking to dinner or to recreation. When sexual comments from male prisoners are unwelcome, they can feel embarrassing or degrading.

It is *always* inappropriate for guards to have sexual contact with prisoners, and such behavior constitutes sexual misconduct even if a prisoner agrees to the sex. Some women believe they will benefit from such arrangements either through increased privileges or benefits such as food, money, or drugs, and therefore comply with the guards' demands. Although a woman in this situation may believe that she has control over the relationship, the guard could turn on her at any time and make her the victim. Prison guards always have the power and the upper hand in these situations due to their position of authority. If they become angry with you, they have the power to lock you down or have you transferred, or get your work assignments changed. They are also disobeying both personnel regulations and departmental policies when they have sexual contact with prisoners, and they may be violating the law. Under these circumstances, a woman's "consent" does not transform this into legitimate behavior. In addition, because sexual contact is strictly forbidden in prison, you could receive a DR if you are caught having sex. This could have a negative impact on your record, and could affect your housing assignment or extend your release date.

You can also suffer other negative consequences if you are sexually assaulted, or if you voluntarily have sex with guards. First of all, you could become pregnant. If you do become pregnant, you will have to make arrangements for the care of your baby while you are incarcerated. Many women who have become pregnant during their incarceration have also been reluctant to seek prenatal care for fear of discovery. This can have serious implications not just for the health of the baby, but for the woman's health as well. This is particularly true for women prisoners whose pregnancies are often high-risk because they tend to be complicated by poor nutrition, drug use, smoking, HIV and other sexually transmitted diseases, diabetes, high blood pressure (hypertension), and obesity. In addition, you could contract AIDS or other sexually transmitted diseases through sexual contact with prison guards. (See Chapter XV, "AIDS and Other STDs.") You can also be sure that if a guard is having sex with you, he is having or probably has had sex with other prisoners as well. Therefore, sexual activities with prison guards encourage the spread of sexually transmitted diseases, and threaten not only your health, but your life!

WHAT TO DO IF YOU ARE SEXUALLY HARASSED OR ASSAULTED

If you are sexually harassed or sexually assaulted by a prison guard, there are a number of steps you can take to prevent the guard from harassing you or any other prisoner in the future. In the past, the procedures for reporting sexual harassment in prison were inadequate, and there were many holes in the system. As a result of the *Women Prisoners* litigation, the Court ordered the Department of Corrections to implement a very specific protocol for handling women prisoners' complaints of sexual harassment in a **confidential manner**. The decision **forbids** prison guards or other DCDC official from retaliating against a prisoner who reports improper conduct. A DCDC employee who breaches the confidentiality of or interferes with an investigation of sexual harassment, or who retaliates in any form against a prisoners who has filed such a complaint, can be suspended or terminated.

If you do not get a response to your complaint, or if no action is taken against your harasser, contact one of the prisoners' advocacy organizations listed at the end of the chapter.

Filing Your Complaint

As part of its decision, the Court appointed a special Monitor to investigate all complaints of sexual misconduct in the Department of Corrections. The Monitor is not a Department of Corrections employee. As part of her responsibilities, the Monitor is required to establish a 24-hour telephone hotline for receiving prisoners' complaints of sexual harassment. This means that you can file a complaint at anytime, day or night, in a confidential manner. However when this *Resource Guide* went to press, this provision of the court order was still being litigated. The Monitor requirement is therefore not being enforced pending action of the Court.

In the meantime, prisoners can report sexual harassment by following the procedures in the new sexual harassment D.O. The D.O. enables a prisoner to file a complaint of sexual harassment by completing an IGP form. The procedure for filing an IGP form is described in detail in Chapter VI, "Dispute Resolution". You should write "EMERGENCY" at the top of the form, and send it directly to the Director of the Department of Corrections. If no IGP forms are available on your unit, you may also write a letter to the Director through the institutional mail or the regular mail. Write "legal mail" on it to make sure it is not opened by anyone but the Director.

In addition to these formal measures, the D.O. requires that any DCDC employee who learns of or witnesses sexual misconduct must report it to the Director in writing within 24 hours, or be subject to discipline. This means that you should be able to report sexual misconduct just by informing a DCDC employee of the event. To ensure it is reported, or to protect your confidentiality, you should use the 24-hour hotline or file an IGP.

Investigating Complaints of Sexual Harassment

Once the Director or Monitor receives a complaint of sexual misconduct, the Department of Corrections should conduct an internal investigation to determine whether the harassment actually occurred. If you wish to be represented by an attorney during the investigation, contact one of the organizations listed at the end of this chapter. When appropriate, the alleged harasser may be transferred to another facility or put on leave while the complaint is investigated. The Monitor has 30 calendar days to investigate your complaint and submit a final written report to the Director and the Warden. After receiving the Monitor's report, the Warden must inform you of the outcome of the sexual misconduct investigation within 48 hours. If you are not satisfied with the outcome, you may appeal the Director's decision within 5 calendar days of receiving the written notice. The Director must respond to your appeal within 10 calendar days of receiving it.

If the investigation concludes that sexual misconduct has occurred, the Department of Corrections must take administrative action against the guard within 15 calendar days of receiving the Monitor's report. The Department is required to suspend or fire a guard found guilty of harassment, depending on the offense.

Notifying the Police

If you inform any DCDC personnel that you were raped or assaulted (which means that you experienced unwanted touching of any sort), that person is required to notify the appropriate police department (the DC Metropolitan Police Department if you are at CTF or the Jail, or the Fairfax County Police Department or the FBI if you are at Lorton). If you have been raped, insist upon being taken to DC General Hospital for a "rape kit." A rape kit is a procedure performed at the hospital where an alleged rape victim is given a pelvic exam, and hair and semen

samples are taken. This is very important because often this is the only evidence that a sexual assault occurred. The hair and semen samples can also be matched with those of the alleged assailant. You should also make sure that you bring the clothing and underwear you were wearing at the time of the assault with you to DC General Hospital because semen and hair samples can often be taken from them.

Once the police department is informed of the incident, it will conduct its own investigation to determine whether criminal behavior took place. If the police conclude that it did, they may arrest the alleged assailant and file criminal charges against him. He could go to trial as a result, and could face prison if he is found guilty.

CONCLUSION

Sexual harassment is a serious matter. It is very demeaning to the women involved, as well as to all other women in the institution. This kind of conduct creates an environment where all women, both prisoners and employees, are seen as fair game and targets for sexual contact. Some women engage in sexual contact with guards thinking they can control the situation. Experience has shown that these women are rarely in control of the situation and often the conduct escalates to a point where they have endangered their health and their safety and have sometimes jeopardized their release. Many women who are sexually harassed experience fear, shame, and embarrassment. Others experience depression, and many blame themselves for what happened. Many women wonder what they could have done differently. If you are harassed or sexually abused, you must remind yourself that **you are not to blame.** If you were raped, you need to seek help. You may need treatment if you contacted sexually transmitted diseases or experienced other injuries. You will also need a pregnancy test. **If you have been raped, contact the medical facility at your institution immediately.** You may also want to talk with a social worker or other mental health professional at your facility.

If you have been sexually harassed or raped, you should file a complaint against your harasser. You should also consider contacting one of the organizations listed below.

ORGANIZATIONS TO CONTACT

D.C. Rape Crisis Center
P.O. Box 34125
Washington, DC 20043
ATTN: Counseling & Advocacy Department
(202) 333-7273 (24-hour hotline; no collect calls.)

National Women's Law Center
Women in Prison Project
11 Dupont Circle, NW
Suite 800
Washington, DC 20036
(202) 588-5180

D.C. Prisoners' Legal Services Project
1400 20th Street, NW
Suite 117
Washington, DC 20036
(202) 775-0323

DC Public Defender Service
Prisoners' Rights Program
P.O. Box 47
Lorton, Virginia 22079
(703) 643-1034
(202) 628-1200

REFERENCES

For further information, refer to Department Order 3350.2, Sexual Misconduct Against Inmates. Also see, *Women Prisoners of the District of Columbia Department of Corrections v. District of Columbia*, No. 93-2052, slip op. (D.D.C. Dec. 13, 1994), or call the National Women's Law Center.

V. DISCIPLINARY REPORTS

INTRODUCTION

At some point during your incarceration, a correctional employee may file a disciplinary report ("DR") against you. A DR charges a prisoner with violating the facility's regulations, such as prohibitions against fighting, disrespecting an officer, or possessing contraband. If you are found guilty of the act in the disciplinary report, you face a range of punishments from a reprimand to a "lock-down" for several days or loss of good time credit. If the offense is serious enough, criminal charges may be filed against you. A disciplinary report is also placed in your prison file and could hurt your chances of being paroled or being placed in a halfway house.

It is very important that you know how the disciplinary process works and your rights in the process. The regulations governing DRs at the Lorton Minimum Security Annex and the Correctional Treatment Facility are the Lorton Regulations Act of 1982 ("Regulations"). The regulation governing DRs at the Jail are the Adjustment Board Procedures Detention Services, Service Order 5300.1B ("Service Order"). You should receive a copy of the Regulations or Service Order during orientation when you first enter the facility. If you do not have a copy, request one from your case manager. You can also request a copy from the Prisoners' Rights Program, D.C. Public Defender Service, P.O. Box 47, Lorton, Virginia, 22079. Listed below are the different offenses with which you may be charged and their penalties. A question and answer section is also provided listing prisoners' most common questions regarding DRs.

OFFENSES AND PENALTIES

There are three classes of offenses: Class I - Serious Offense; Class II - Major Offense; and Class III - Minor Offense. Each class of offense carries different penalties.

Class I Offenses (Serious Offenses)

Class I offenses carry the most severe penalties, and **can result in criminal charges being filed against you** and the loss of good time credit. For example, an officer may file a DR against you for assaulting another prisoner. Since assault is also a crime, you may face a criminal charge of assault. **Any statement you make at your DR hearing regarding a Class I offense may be used against you in a criminal prosecution for that offense**. Therefore, if you are charged with a Class I offense, you should have a lawyer represent you at the hearing. The Prisoners' Rights Program of the Public Defender Service represents prisoners charged with Class I offenses. They can be reached at (703) 643-1034. Also refer to section 102, Regulations, or section 2.A, Service Order, for a definition of each Class I offense.

CLASS I OFFENSES

If you are found guilty of any of the following offenses . . . .

- Murder
- Manslaughter
- Kidnapping
- Armed Robbery
- Forcible Sexual Assault
- Restraint
- First Degree Burglary
- Assault
- Arson
- Tampering with a Witness or Informant
- Bribery
- Escape
- Possession of Major Contraband
- Theft
- Receiving Stolen Property
- Engaging in a Riot
- Inciting a Riot
- Damage or Destruction of Property
- Forgery and Tampering

Then you may be subject to any or all of the following penalties . . . .

- Forfeiture of all or a portion of earned Good Time Credits
- Change in custody status or housing assignment
- Assignment to administrative segregation ("lock-down") for up to 14 days
- Transfer to maximum security status
- Loss of pay, reduction in grade, or change in work assignment (if the offense was committed while on the job)
- Extra duty assignment to be performed in your off-duty time from your regular work assignment
- Lock-down for no longer than 7 days
- Reprimand and warning
- Restitution (where appropriate)
- Confiscation (where appropriate)

Class II Offenses (Major Offenses)

These offenses are less serious than Class I offenses but can also result in criminal prosecution. You should try to obtain legal representation at a hearing for a Class II offense, although it may be more difficult. If you are unable to obtain an attorney, read the Regulations or Service Order carefully and represent yourself. Refer to section 103, Regulations, or section 3.A, Service Order, for a definition of each offense.

CLASS II OFFENSES

If you are found guilty of any of the following offenses . . . .

- Bodily Injury
- Homosexual Activity
- Fighting
- Lack of Cooperation
- Gambling
- Falsifying Physical Evidence
- Possession of Contraband
- Lying
- Threatening Conduct
- Creating a Disturbance
- Giving a False Alarm

Then you may be subject to the same penalties listed under Class I offenses.

Class III Offenses (Minor Offenses)

These are minor offenses for which DRs are generally not filed, and are often resolved informally without a hearing. A correctional employee can find you guilty of the charged offense and penalize you without going before the adjustment board. The correctional employee is not required to fill out a disciplinary report, which means the incident would not go in your institutional record. If the penalty is lock-down, however, the correctional officer must write a DR, and you must have a hearing. In order to justify a lockdown penalty, these DRs will go in your prison jacket. Refer to section 104, Regulations, or section 5.A, Service Order, for a definition of each offense.

CLASS III OFFENSES

If you are found guilty of any of the following offenses . . . .

- Unauthorized Use of Property of Another
- Out of Place or Absent at Count

- Abuse of Privileges
- Disorderly Appearance and Clothing
- Abuse of Living Quarters
- Disrespect
- Willful Disobedience of a General Order
- Creating a Health, Safety or Fire Hazard

Then you may be subject to any or all of the following penalties . . . .

- Lock-down for no longer than 7 days
- Reprimand and warning
- Restitution (where appropriate)
- Confiscation (where appropriate).

COMMONLY ASKED QUESTIONS AND ANSWERS

Detailed below are the questions prisoners frequently ask about the disciplinary process. You may have others. Most can be answered by reading through the Regulations or Service Order.

What is a DR and what goes into it?

When a correctional officer charges you with a violation of the Department's "Code of Offenses" as set forth in the Regulations or Service Order, s/he will fill out and sign a **disciplinary report** ("DR"). In this DR, s/he must include:

(1) your name and DCDC number;
(2) the specific facts of the violation;
(3) the time, place, and date of the violation;
(4) the name and section number of the offense; and
(5) any witnesses who were present.

What purpose does the written DR serve?

The DR is an important document because it is a written record of the alleged offense and contains the names of all the parties involved. It has information you will need to defend yourself against the charges.

What should I do when I receive a DR?

When you receive your copy of the DR, read it carefully and be sure to **check all the information**. According to the Regulations, the charging officer must conduct a sufficient investigation to make sure that s/he has all available facts related to the offense. The accusing officer must be specific in her or his report. For example, if you are charged with "being out of place or absent at count" (section 104.3, Regulations, or section 6.A.2, Service Order), the accusing officer must cite the specific name and section number of the offense, and specify whether you failed to report, left a place against an order or were in an unauthorized area. If there are any errors or if the DR contains omissions or vague information, you should argue that the DR is incomplete, fails to comply with the guidelines, and should therefore be dismissed. (Sections 106.2 and 106.3, Regulations.)

How much time does the officer have to file a DR?

The accusing officer must file the DR with the shift supervisor **within 24 hours** of the violation. In special circumstances, the officer has **two working days** to file the report. The report, however, must explain the circumstances causing the delay. If the DR is not filed within the required time frame, you should argue that the DR must be dropped because the correctional officer did not comply with the Regulations (section 106.4).

What role does the shift supervisor play?

Once the shift supervisor receives the DR, s/he must **immediately** investigate the offense and summarize the results of that investigation in an

investigative report. The shift supervisor must then decide whether to **reprimand and warn** the accused resident, **refer the DR for an adjustment hearing,** or **reject** the DR. One way to stop the DR before it goes to a hearing is to talk to the shift supervisor and convince her not to file it. You can convince her that the incident never happened or that it can be resolved without a hearing.

If the DR is referred for an adjustment hearing, the shift supervisor must meet with you and tell you that a DR has been filed against you. At this meeting, the shift supervisor will advise you that you have a right to be represented by an attorney, a right to call witnesses and a right to choose between being heard by a three-member hearing board or by one hearing officer. It is up to you to decide whether you prefer going in front of a three-member board or just one hearing officer. Having only one hearing officer means you only have to persuade one person that you are not guilty of the charged offense. However, if you are unsuccessful in persuading that one person, you are out of luck. You also will not have the benefit of two other board members who may be sympathetic to your case.

Do I give a statement to the shift supervisor?

After the shift supervisor informs you of the DR, you have an option of making a statement. You should make a statement if you have information that could help convince the supervisor not to pursue the matter further. **However, you should not make a statement if the charged offense could result in criminal prosecution (such as a Class I offense).** In such a situation, the shift supervisor must advise you that you may be prosecuted and that you do not have to make a statement.

Will the accusing officer or the shift supervisor be present at the hearing?

Neither the shift supervisor nor the accusing officer are likely to be present at the hearing. If you want either one to testify as your witness, you can make such a request at your meeting with the shift supervisor.

How do I know if I will have an adjustment hearing?

Within three days after the shift supervisor completes her/his investigation, s/he must meet with you and provide you with a copy of the DR and investigative report. Also, the shift supervisor must **inform you of your hearing date in writing**. You should receive at least three days notice prior to the hearing, and the hearing must be held within three working days after you receive the DR and investigative report.

Do I need an attorney for the hearing? How do I find one?

The shift supervisor will ask you if you wish to be represented by an attorney. You do not need to be represented by an attorney for most of the offenses and can represent yourself at your hearing. However, you should **NEVER WAIVE YOUR RIGHT TO AN ATTORNEY** even if you plan to represent yourself. You can try to find an attorney or a law student to represent you at your DR hearing. At some of the facilities, another prisoner who is more familiar with the process can also represent you.

If you are charged with a Class I - Serious Offense, you should get an attorney because these charges may lead to criminal prosecution. **In order to find an attorney, you can ask to postpone the hearing date for a reasonable period of time.**

Can I call witnesses?

You have the right to call at least two witnesses. When the shift supervisor informs you of the DR hearing, s/he should ask you if you wish to call any witnesses. **NEVER WAIVE YOUR RIGHT TO CALL WITNESSES**. If you want to call more than two witnesses, you must get the adjustment board's permission. As long as the extra witnesses can provide testimony that relates to your case and no other witness can provide that information, those witnesses should be allowed to testify. (Section 110.2, Regulations, or page 24, Service Order.) If the adjustment board denies your request to call more than two witnesses, they must state their reasons on the record of the hearing. If you have an attorney, s/he has a right to meet with any potential witnesses at least 48 hours prior to the hearing.

Tip: Call all the witnesses you need, but make sure to call only the witnesses that can provide information directly related to your DR. If you have three people that will say the same exact thing, call the most believable of the three and get written and signed statements from the other two witnesses.

Who sits on the adjustment board?

The adjustment board should be made up of three correctional officers who are impartial and have not been involved in any way in the alleged offense. (Section 109.1, Regulations, or page 23, Service Order.) If members of the adjustment board were involved in the investigation process or the incident leading up to the DR, point that out at the hearing, and ask for a new panel or ask to be heard by a hearing officer.

Is the adjustment hearing recorded?

All hearings must be tape recorded or recorded in writing and preserved for at least two months after all administrative review is completed. At the beginning of the hearing, make sure to get the tape number of the hearing. This is important because you or your representative may listen to the tape or read the record if you wish to appeal the decision of the adjustment board or hearing officer. Also make sure that the tape remains on at all times.

What happens at the hearing?

When the hearing begins, the hearing officer or a member of the adjustment board will read the DR to you. After the DR is read, you or your representative (such as an attorney or law student) may give an opening statement. You should take this opportunity to state your case. Explain your side of the story to the hearing officer or adjustment board in a clear and calm manner. Inform the officer on the board of any errors or facts missing in the DR. You should also raise any concerns you have regarding the shift supervisor's investigation. The hearing officer or adjustment board will ask you a series of questions which you must answer. Then you or your representative can give a closing statement. This is your last chance to argue your case and to sum up your evidence in a favorable way. Throughout the hearing, try not to lose your temper. Staying calm can help you win your case.

After the evidence is presented, the board or hearing officer will make a determination as to your guilt or innocence. If you are heard by the adjustment board, at least two members of the adjustment board must agree on the decision.

Can the hearing officer or the adjustment board use information in my institutional jacket to help them determine my guilt or innocence?

The decision of guilt or innocence must be based only on the matters presented at the hearing, and the board or hearing officer cannot examine your jacket or prior disciplinary record. If you are

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found guilty, however, your past institutional conduct, including previous DRs, will be reviewed to determine the appropriate penalty.

How does the board set the penalty if they find me guilty?

The board or hearing officer will inform you at the hearing whether they have found you guilty or innocent. After you are found guilty, you or your representative can then give a statement as to the appropriate penalty. The board will then issue a written decision which must include their findings and the facts upon which their findings were based, a decision of guilt or innocence, your penalty, and information on your right to appeal. Within three days of the hearing, you should receive a copy of the written decision. Pending any appeal, you must comply with the penalty.

Who reviews the decision of the adjustment board or hearing officer?

Within three working days of receiving the decision of the adjustment board or hearing officer, the Warden or a person designated by the Warden must review the decision and then promptly notify you that the review has been completed. To appeal the decision, you must write a statement to the Warden based on any of the following reasons: (1) the board or hearing officer did not follow the proper procedure; (2) the evidence against you was not strong enough to find you guilty; or (3) the punishment imposed by the board or hearing officer is too severe for the offense committed. After the Warden reviews the decision, s/he has several options. S/he may: (1) dismiss the guilty verdict and all penalties imposed; (2) reduce the penalty imposed; (3) send the case back to the board or hearing officer for reconsideration; or (4) accept the decision and do nothing more. **If your case is appealed, the board or hearing officer may not give you a harsher sentence than the one given at the original hearing.**

Under what circumstances can the Warden send my case back to the hearing officer or the adjustment board for further consideration?

If the adjustment board or hearing officer found you guilty at the hearing, the Warden cannot send your case back simply to increase your penalty or for an arbitrary reason. If you were found not guilty, the Warden has the power to send the case back for further consideration ***only if any relevant witness or evidence was refused at the hearing***. After the new evidence is presented, the adjustment board or the hearing officer may find you guilty and impose a penalty. If the case is sent back and you are found guilty, you have a right to appeal that determination of guilt to the Director of the Department of Corrections.

What happens after the hearing, review and appeal processes are over?

If you are found guilty after all the review and appeal procedures have been exhausted, all reports, documents, and proceedings will be placed in your prison record. If you are found not guilty, however, all materials related to that DR must be destroyed or maintained in a file separate from your prison record.

I have completed the appeal process and lost. I just received a notice that they have forfeited my good time credits. Can I do anything to get my good time back?

If your penalty includes forfeiture of good time credits, you have a right to appeal that decision. While the adjustment board can recommend forfeiture of good time credits, this penalty must be approved by the Director. You can appeal a forfeiture of good time credits to the Director of the Department of Corrections within 3 working days by filing an appeal form which should be provided to you with the notice of forfeiture. After the Director receives your appeal, s/he

must make a decision within five days. Within two weeks, the Director must send you a written notice of his/her decision (see Chapter II, "Sentence Computation").

FINAL CHECKLIST

- Do you have a copy of the Lorton Regulations Approval Act of 1982 or the Adjustment Board Procedures Detention Services, Service Order 5300.1B, depending on your facility ?
- Did the shift supervisor inform you that a DR has been filed against you?
- Did the shift supervisor read you the DR?
- Did the shift supervisor ask you if you wanted to make a statement?
- Did the shift supervisor inform you whether or not the charges against you may also result in criminal prosecution? If so, did the shift supervisor inform you that you do not have to make a statement because it may be used against you in a criminal proceedings?
- Did the shift supervisor allow you to choose between appearing before a hearing officer or the full adjustment board?
- Did you get a written copy of the DR and the shift supervisor's investigative report?
- Did the accusing officer include all the necessary information in the DR?
  - ❑ **your name and DCDC number**
  - ❑ **time, date and place of alleged offense**
  - ❑ **specific facts related to the alleged offense**
  - ❑ **names of any witnesses**
  - ❑ **name and section number of the charges**
- Did the accusing officer file the DR within 24 hours of the alleged offense? If not, was it within two working days? If so, is the reason for the delay stated in the DR?
- Did you get written notice of your hearing date at least three days prior to your hearing time?
- Is the hearing date within three days of when you received your copy of the DR and the investigative report?
- Are you charged with a Class I, Class II, or Class III violation?
- If you are charged with a Class I violation, do you have an attorney? If not, did you contact the Prisoners' Rights Program of the Public Defender Service?
- Did you read the section of the Regulations that relates to your charge?
- Does the DR contain facts to support the charges against you?

For more detailed information, consult:

- Lorton Regulations Approval Act of 1982
- Adjustment Board Procedures Detention Services, Service Order 5300.1B
- Prisoners' Rights Program
  D.C. Public Defender Service
  P.O. Box 47
  Lorton, Virginia 22079
  (703) 643-1034
  (202) 628-1200
- D.C. Prisoners' Legal Services Project
  1400 20th Street, NW
  Suite 117
  Washington, DC 20036
  (202) 775-0323

VI. DISPUTE RESOLUTION

INTRODUCTION

During your incarceration, you may need to file a complaint concerning problems ranging from a dangerous prison condition to a violation of your constitutional rights. There are three methods for addressing such problems while you are incarcerated. First, you can try to resolve your grievance on an informal basis. Second, you can file a formal written complaint, called an Inmate Grievance Procedure ("IGP"), with the prison administration. However, an IGP is only appropriate in specific instances. If an IGP does not cover the type of complaint you are making, or if the IGP process has not resulted in a satisfactory outcome, your third option is to file a lawsuit. This chapter discusses informal dispute resolution and the IGP process.

RESOLVING PROBLEMS INFORMALLY

Many of the problems you may have during your incarceration can be handled through informal procedures such as talking to the people involved. For example, if your complaint is about lost or damaged property, you should contact the officers involved to find out if they know what happened to your property or whether they can help you recover the value of the property. You can also ask family members or other people in the community to speak on your behalf, or contact advocacy organizations to assist you.

Always keep a record of your attempts to informally resolve your problem in case you are unsuccessful and you need to file an IGP form or bring a lawsuit. For example, keep copies of any letters you or your family send to the DC Department of Corrections ("DCDC"), and keep records of the names of the people you speak to and the dates and times of your contacts as well. If the problem is brought to the attention of the appropriate individuals at the DC Department of Corrections they will, in many situations, do their best to assist you. Of course, there will be times when following informal procedures may not work. In these circumstances, you may feel it is appropriate to file a formal complaint. The following sections instruct you how to file a formal complaint.

INMATE GRIEVANCE PROCEDURES

While you are incarcerated, you have the right to make formal complaints concerning **prison policies**, **prison conditions**, or **incidents involving other prisoners or correctional employees within your correctional facility**. In order to make these complaints, you must complete a written IGP. You may also use an IGP to **report the loss or damage of your property** and to recover the value of the lost or damaged property.

You cannot, however, use an IGP to file a complaint relating to:

- Parole decisions (see Chapter IX, "Surviving the Parole Process");
- Adjustment/Housing Board decisions (see Chapter V, "Disciplinary Reports");
- Classification Committee decisions;
- Freedom of Information Act requests; and
- Inmate Accident Claims or other Tort Claims.

Basic Rules Governing IGPs

The following rules govern the filing of IGP forms. The last three rules are specifically designed to protect you when you file a complaint.

- You are only allowed to describe **one** complaint or incident per IGP form. You may file separate IGP forms for any other complaints you may have.

- You may only file an IGP regarding a complaint that involves <u>you</u> directly. Therefore, you cannot file an IGP regarding an incident that happened to someone else if you were not directly involved. For example, if you witness an officer harassing another prisoner, you cannot file an IGP to complain about the officer's behavior toward that prisoner.

- The records concerning your complaint are supposed to be confidential. Therefore, no one should know about it except you and the DCDC employees with whom you file the IGP.

- If you complain about a prison employee, that employee should not be allowed to participate in the investigation of your grievance.

- Other prisoners may not participate in the investigation if you do not want them to.

- It is against the law for prison officials to retaliate against you for filing a complaint. This means that if you file a complaint against a correctional employee, neither that employee nor the Department of Corrections is allowed to "get back at you" or threaten you for filing a complaint.

You should note, however, that this last rule is not always followed. For instance, a correctional officer against whom you filed an IGP may harass you and then file a DR against you for talking back to her or "disrespecting" her. If you do talk back to the officer, get into a fight, or violate one of the facility's rules, the DC Department of Corrections will prosecute you for that violation. You can try to avoid this kind of incident by staying out of that officer's way or by having witnesses around that can prove that the officer instigated the incident. (See Chapter V, "Disciplinary Reports.") In any case, if you file an IGP against an officer and you feel that she is doing things to get back at you or is threatening you in any way, you can file another complaint against her.

Filing an IGP Form

If you are unable to resolve the problem informally and you wish to file an IGP, you will need to do the following:

- Obtain an IGP form from a correctional officer in your unit and fill out the information required in the spaces provided.

- If you cannot obtain an IGP form, write your complaint on plain letter size paper. If you are using plain paper, write "**INMATE GRIEVANCE PROCEDURE**" across the top of that page and include the following information:

  - ❑ your full name and DCDC number;
  - ❑ your cell block number;
  - ❑ the name of your correctional facility;
  - ❑ specific details of your complaint;
  - ❑ the remedy you are seeking and what you want the Warden to do about your problem;
  - ❑ your signature; and
  - ❑ the date you file the complaint.

- When describing your complaint on the IGP form, remember to stay focused on the incident you are discussing and provide only information related to that issue. If your IGP form includes too much information that is unrelated to the particular incident, the Warden will have a difficult time sorting it out and may not grant you the relief you are seeking.

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- If you do not speak English, or if you are unable to complete an IGP form due to a disability (if, for example, you cannot read or write), notify a correctional officer because they are required to find someone to assist you. You might feel more comfortable asking another prisoner to help you. If you have a friend whom you can trust, ask her to help you instead.

- Make copies of all forms you send out or receive for your records.

- Submit the completed IGP form to the Shift Supervisor. If you are filing an IGP against one Shift Supervisor, then submit it to another Shift Supervisor.

- Get a receipt from the person who takes your form. This receipt will act as proof that you submitted the IGP form, and is necessary because sometimes your IGP form gets lost after you file it.

When filing an IGP form for property loss or damage, you must also:

- specifically and carefully **describe each lost or damaged item;**

- note whether it was **lost or damaged;**

- if the claim is for damaged property, describe **the extent of the damage;**

- describe **how it was lost or damaged;**

- state **when** the item was lost or damaged; and
- note **how much** the lost or damaged **item is worth.**

It helps to attach copies of receipts for the lost or damaged property (if you have them) to prove the money value of your property. As always, keep copies of the IGP and any other documents that you submit.

The following section describes the procedure and time limits within which you should file your complaint, receive a response to your complaint, and file appeals related to your IGP. Follow the appropriate instructions depending on whether you: (1) are incarcerated in a prison or jail; (2) are confined to a halfway house; or (3) are filing an emergency complaint. It is very important that you follow the set procedures outlined below, or your complaint will be dismissed.

IF YOU ARE IN PRISON OR IN JAIL

The First Step — the Warden of Your Facility

- You must file your complaint within 15 days of the date of the incident for which you are seeking relief.

- If you are unable to meet this deadline, write to the Warden of your facility to request more time. However, extensions are rarely granted. Therefore, you should try to meet the 15-day deadline. If you request an extension, the Warden must respond to your request within 5 days.

- The Warden's response should be delivered to you within 15 days of the date you filed the IGP. The response must be in writing, and must describe the reasons for any decisions made by the Warden concerning your complaint. There may be instances where the Warden cannot respond to your IGP within 15 days. If this situation occurs, s/he should notify you in writing. You can either consent to an extension or go on to the next step in the procedure.

- If you consent to extending the Warden's time limit for responding to your IGP, you must do so in writing and specify the length of the extension. If at any point the Warden fails to respond to your complaint within the required time period, you should proceed to the next step in the grievance procedure.

The Second Step — Appeal to the Deputy Director for Institutions

- If you are not satisfied with the Warden's decision and wish to appeal it, you must file an appeal within 5 days of receiving a response to your complaint. An appeal is a letter explaining why you believe the Warden acted in error in responding to your complaint.
- Use the IGP form entitled "Inmate Grievance Procedure Appeal." If these forms are not available, use a plain piece of paper and write the words **"INMATE GRIEVANCE PROCEDURE APPEAL"** across the top of the paper.
- When filing the appeal, include a copy of both your original IGP and the Warden's response.
- Keep copies of all the documents you file with the Deputy Director.
- The Deputy Director has 15 days to respond to your appeal.

The Final Step — Final Appeal to the Director

- If you are not satisfied with the Deputy Director's decision regarding your appeal, you can make a final appeal to the Director of the DC Department of Corrections within 5 days of receiving your response.
- Use the special form for this appeal entitled "Inmate Grievance Procedure Appeal (Director's Remedy)." If you cannot obtain this form, use a plain piece of paper with the words **"INMATE GRIEVANCE PROCEDURE APPEAL TO THE DIRECTOR"** written across the top of the paper.
- Attach a copy of: (1) your original IGP; and (2) the response from both the Warden of your facility and the Deputy Director for Institutions.
- Keep copies of all the documents you file with the Director's office.
- The Director must respond to your appeal within 15 days. The Director is the last appeal in the IGP process.

IF YOU ARE IN A HALFWAY HOUSE

The First Step — The Administrator of Your Halfway House

- You must file your complaint within 15 days of the date that the incident occurred.
- If you are unable to meet this deadline, request an extension from the Administrator of the halfway house. Extensions, however, are rarely granted. Therefore, you should try to file the IGP within the 15 days.
- The halfway house Administrator must respond to your request for an extension within 6 days.
- Keep copies of the IGP submitted to the Administrator.
- You should receive a response within 10 days of the date you filed the IGP. The response

must be in writing, and must describe the reason for any decision made by the Administrator concerning your complaint. There may be cases where the Administrator cannot respond to your IGP within 10 days. If this situation occurs, s/he should notify you in writing.

- You can either consent to an extension or go on to the next step in the procedure. If you consent to extending the Administrator's time limit for responding to your IGP, you must do so in writing and specify the length of the extension.

The Second Step — Appeal to the Administrator for Community Release Programs

- If you are not satisfied with the Administrator's decision, you may file an appeal with the Administrator for Community Release Programs within 5 days of receiving your response.
- In order to file an appeal, you must use a special form. If you are unable to obtain one, use a blank piece of paper and write **"INMATE GRIEVANCE PROCEDURE APPEAL"** across the top.
- Include a copy of both your original complaint and the halfway house Administrator's response.
- The Administrator for Community Release Programs has 10 days to respond to your appeal.

The Third Step — Appeal to the Deputy Director for Institutions

- If you are not satisfied with the Administrator for Community Release Programs' decision regarding your appeal, you can make another appeal to the Deputy Director for Institutions within 5 days of receiving your response.
- Include a copy of your original complaint, along with the responses from both the halfway house Administrator and the Administrator for Community Release Programs.
- The Deputy Director must respond to your appeal within 10 days.

The Final Step — Appeal to the Director of the DC Department of Corrections

- If you are not satisfied with the Deputy Director's response, you can make a final appeal to the Director within 5 days of receiving your response.
- Include all copies of your complaints and the responses you have received.
- Keep copies of all the documents you file.
- The Director must answer your appeal within 15 days. The Director has the final word in the IGP process.

EMERGENCIES

If you believe that following the normal grievance process will place you at risk of harm or injury, you can file an emergency grievance. In this case, you need to do the following:

- Use the regular IGP form or a blank piece of paper, but write "**EMERGENCY GRIEVANCE**" at the top and describe why it is an emergency.
- If the Warden or Administrator of your facil-

ity agrees that this is an emergency, s/he must answer your request within 72 hours.

- If the Warden or Administrator does not believe you have an emergency or if you are not satisfied with the response to your IGP, you may appeal to the next level (as described above) within 48 hours. The appropriate individual must respond to your appeal within 72 hours.

- **If your complaint is sensitive in nature (involving sexual harassment, for example) and you believe that you would be negatively affected if officers at the facility knew that you were filing an IGP, you can send it directly to the Director of the Department of Corrections through the regular institutional mail.**

CONCLUSION

When you are trying to resolve a problem, keep in mind that filing formal complaints often increases tensions between disputing parties. Therefore, before you pursue any formal course of action, it is important to try to handle your grievance informally by discussing it with the appropriate individuals or by getting help from people who will speak on your behalf. Remember that the IGP procedures require you to try to resolve your grievance informally before you file your complaint. If your efforts at informal dispute resolution are successful, you will save yourself a great deal of time, energy and worry. However, if they are unsuccessful, do not be discouraged, for the IGP process may provide you with relief. Finally, if the IGP process does not bring you the results you desire, or if an IGP does not apply to your particular grievance, you may want to explore whether litigation is an appropriate option to pursue.

ADDRESSES OF DC DEPARTMENT OF CORRECTIONS OFFICIALS

To File Your IGP...

If you are at the Minimum Security Facility Annex...

Douglas Stempson
Warden
Minimum Security Facility
P.O. Box 5000
Lorton, Virginia 22199
(703) 643–6901

If you are at CTF...

Adrienne Poteat
Warden
Correctional Treatment Facility
1901 E Street, SE
Washington, DC 20003
(202) 673–8046

If you are at the Jail...

William Plaut
Warden
Central Detention Facility (D.C. Jail)
1901 D Street, SE
Washington, DC 20003
(202) 673–8201

If you are at Extended House...

George A. Williams
Administrator
Extended House, Inc.
814 14th Street, NE
Washington, DC 20002
(202) 396–2270

National Women's Law Center
6371

If you are in the facilities run by Washington Halfway Home for Women...

Trudie Wallace House...
Discovery Manor...

Loretta Caldwell
Executive Director
Trudie Wallace House
1816 19th Street, NW
Washington, DC 20009
(202) 462–8982

To appeal...

If you are at Minimum...

Bernard L. Braxton
Deputy Director for Institutions
P.O. Box 25
Lorton, Virginia 22199
(703) 643–1357

If you are at CTF or the Jail...

John Thomas
Deputy Director for Programs
1923 Vermont Avenue, NW, Room 102
Washington, DC 20001
(202) 673–6595

If you are at the halfway house, you should first write to:

John W. Noble
Administrator for Community
Release Programs
300 Indiana Avenue, NW
Washington, DC 20018
(202) 727–2700

And if you are not satisfied with Mr. Noble's response, write to:

Bernard Braxton
Deputy Director for Institutions
P.O. Box 25
Lorton, Virginia 22199
(703) 643–1357

To Get the Final Word...
Whether you are at the halfway house, Minimum, CTF, or the Jail...

Margaret Moore
Director, DC Department of Corrections
1923 Vermont Avenue, NW, Suite N-203
Washington, DC 20001
(202) 673–7316

ORGANIZATIONS TO CONTACT FOR ASSISTANCE

D.C. Prisoners' Legal Services Project
1400 20th Street, NW
Suite 117
Washington, DC 20036
(202) 775–0323

National Women's Law Center
Women in Prison Project
11 Dupont Circle, NW
Suite 800
Washington, DC 20036
(202) 588–5180

Prisoners' Rights Program
DC Public Defender Service
P.O. Box 47
Lorton, Virginia 22079
(703) 643–1034
(202) 628–1200

COMMUNITY TRANSITIONS

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VII. FURLOUGHS

INTRODUCTION

The DC Department of Corrections allows prisoners to be released on furloughs for work training. This furlough program provides prisoners with the opportunity to obtain vocational training in the community. Participating in this program, however, does not mean that you are released from the prison. You must return to the facility every night at a designated time. This chapter provides basic information about the work training program, as well as resocialization and emergency furloughs.

ELIGIBILITY REQUIREMENTS

There are certain conditions you must meet to participate in the furlough program. Generally, prisoners are eligible if they have earned a minimum custody status, have met institutional performance requirements, and have received a favorable recommendation from the Classification Committee. In addition, you must not be identified with organized crime, and your presence in the community should not generate negative publicity. Moreover, certain eligibility requirements differ for prisoners convicted of violent and non-violent crimes. These requirements are listed below.

Prisoners Convicted of Crimes of Violence

If you have been convicted of a violent crime and have not been participating in a furlough program since December 22, 1976, you probably will not be granted permission to participate in the work training furlough program. The DC Department of Corrections defines the following as crimes of violence:

- murder
- assault with intent to kill
- manslaughter
- assault with intent to rape
- rape
- assault with intent to rob
- kidnapping
- assault with a dangerous weapon
- robbery
- indecent acts with a minor
- burglary
- extortion involving the threat or use of violence to person
- arson

However, prisoners convicted of violent crimes may be considered for a furlough if they meet the following conditions:

- First, you must have served at least twelve months of your sentence, have not been denied parole, **and** have been recommended for furlough at your most recent parole hearing.

- Second, you must fall into **one** of the following categories:

  - ❑ You are within twelve months of the expiration of your maximum sentence, without reduction; or

  - ❑ You are within twelve months of your parole eligibility date; or

  - ❑ You have served at least 90 percent of your minimum sentence, without reduction.

Prisoners Convicted of Non-Violent Crimes

If you were convicted of a non-violent crime, you must have served the following specified minimum period of your sentence in order to be eligible for work training:

- If your minimum sentence is not longer than 30 months, you must have completed at least 50 percent of your sentence.

- If your minimum sentence is longer than 30

months, you must have completed at least 60 percent of your minimum sentence.

The requirement for minimum time served may be waived for inmates convicted of non-violent crimes who demonstrate "exceptional adjustment." In order to have this requirement waived, your case worker must submit a recommendation to the Director of the DC Department of Corrections.

THE PROCEDURE

If you want to participate in the work training program, your case worker must process the required paperwork and submit it to the Classification Committee and the Director of the DC Department of Corrections. Once your case worker submits a request, a Classification Committee will review your paperwork to determine whether you should be recommended for work training. If the Classification Committee determines that you have met the eligibility requirements listed above and have "demonstrated complete institutional adjustment, are highly motivated and are considered to have exceptional potential for rehabilitation," it will forward a recommendation to the Director of the DC Department of Corrections. The Classification Committee will evaluate the following:

- your disciplinary record;
  - ❑ You are probably less likely to be granted a work training furlough if you have numerous disciplinary reports in your institutional record.
- results of any drug tests;
- your psychological or psychosocial evaluation;
  - ❑ Those inmates who have committed violent crimes are required to undergo a **psychological** evaluation conducted by a psychologist in order to obtain mental health clearance for work training furloughs. Based on your psychological evaluation, the Classification Committee must determine that your release from the facility will not constitute a danger to the community.
  - ❑ Non-violent offenders will be required to undergo a **psychosocial** evaluation conducted by a licensed clinical social worker in order to determine whether they are eligible for a work training furlough. The evaluation process is slow because of the shortage of staff available to conduct the evaluations. Often prisoners wait long periods of time to be evaluated.
- your attitude and motivation;
- your behavior; and
- your institutional adjustment.

REMOVAL FROM THE PROGRAM

If you are admitted to a work training program, you must follow the rules of that program carefully. Always return to the facility by the designated time. If you do not return on time, you will be considered an "escapee," which carries a punishment of up to 5 years imprisonment.

Your facility's Warden may suspend your work training privileges for any technical violation of program requirements. If the technical violation is minor and there has been no change in your housing assignment or custody level, the Warden may reinstate your work training privileges. To be reinstated to the work training program, you must be reapproved by the Director of the DC Department of Corrections. However, if your housing assignment is changed or if your custody level is raised, you will be removed from work training.

RESOCIALIZATION AND EMERGENCY FURLOUGHS

The DC Department of Corrections allows inmates participating in the work training program for 30 days without infraction to obtain resocialization furloughs. These furloughs allow prisoners to visit a designated location outside the correctional institution and within the Washington, DC area for up to 72 hours without an escort. Resocialization furloughs enable prisoners to contact prospective employers and plan for their release, and to reestablish ties with their family and community.

Emergency furloughs permit prisoners to attend the funeral of an immediate relative or to visit a dying relative, or to obtain medical services not otherwise provided by the Department of Corrections. Although policies for emergency furloughs still exist on paper, they are no longer granted, because the Department of Corrections had problems monitoring the residents who went out on these furloughs, and too many people released on these furloughs did not return to the facility. As a result, unescorted emergency furloughs no longer exist. Prisoners may, however, go on escorted trips for many of the same purposes (See Chapter VIII, "Escorted Trips").

Although a summary of emergency furloughs is included in this chapter, you should remember that they are not available at the present time.

Eligibility

Prisoners convicted of violent crimes are not eligible for a furlough until they are within 12 months of a parole hearing date. In order to apply for a resocialization or emergency furlough, you must meet the following eligibility requirements:

- You have earned full minimum custody status;
- You have demonstrated responsible attitudes and behavior in the institution such that the Department of Corrections is convinced that you will fully comply with the furlough rules;
- You have received a favorable recommendation from the Classification Committee for a furlough;
- You are mentally, physically, and financially capable of completing the furlough without escort or assistance from Departmental personnel; and
- You have had a favorable psychological assessment within the past year.

If you meet these criteria and are within 12 months of your release date, or if you are participating in a work training program, you may be considered for one furlough per month. If you are not within 12 months of your release date, you may be considered for one furlough every three months.

Procedures

To obtain a resocialization or emergency furlough, your case manager must submit a written request on your behalf. These furloughs are rarely granted, and requests often take a long time to be processed. If possible, you should plan ahead and give your case manager plenty of time to process the paperwork.

If you are granted a resocialization or emergency furlough, you will be advised in writing of the rules of the furlough. If you do not understand any of the rules, make sure that they are explained to you. You must sign a Furlough Release Authorization Form, which indicates that you understand the rules and that you will comply with them. You will be given a copy of this form, and you must keep it on your person at all times while on furlough. If you violate any

rules while you are on furlough, you will be subject to disciplinary action. If you do not return at the time specified on the Authorization Form, you will be considered an escapee, which carries a punishment of up to five years of incarceration.

RESOURCES

Department Order No. 4920.3C (dated January 20, 1994), Work Training Furloughs

Department Order No. 4920.4A (dated September 1, 1977), Resocialization and Emergency Furloughs

Department Order No. 4910.1 (dated November 15, 1991), Escorted Trips

The Department Orders should be available at the law library.

VIII. ESCORTED TRIPS

INTRODUCTION

The DC Department of Corrections allows prisoners to go on escorted trips. An escorted trip is a visit to a specific location outside the correctional institution and within the Washington, DC area for specified reasons. During these visits, which normally last 2 hours, the inmate will be accompanied by a corrections employee. The purposes for which an escorted trip may be authorized are very specific and not all the trips are approved by the same Department of Corrections official. You should be aware of these restrictions and the official with the authority to approve a specific type of trip so that you can direct your request to the proper person.

TYPES OF ESCORTED TRIPS

Escorted trips may be approved for the following purposes:

Job Placement Interview

Prisoners who have been approved for the Work Training Program may be given an opportunity to interview with a former or prospective employer. The **Institution Warden** is authorized to approve these escorted trips.

Critical Illness or Death of an Immediate Relative

A prisoner may be given permission to visit an immediate relative who is stricken with a life-threatening illness. Permission may also be granted for an inmate to privately view the body or attend the funeral of a deceased immediate relative. The inmate's case manager must verify both the prisoner's relation to the patient or decedent and the relative's medical condition or death. The **Institution Warden** is authorized to approve these escorted trips.

Immediate Relative: The Department of Corrections defines an immediate relative as a spouse, son, daughter, parent, brother, or sister or a person who can reasonably be considered as an immediate relative such as stepparents, stepchildren, or legal guardians.

Prisoners have had problems arranging escorted trips to see ill relatives. Often requests are not approved on time. Also, pre-sentence reports are used to determine who your relatives are. If a person is not named in the pre-sentence report you will need to provide verification that they are your relative. This causes problems for inmates who are trying to arrange escorted trips to see critically ill "brothers" and "sisters" with whom they grew up, but are not related to by blood, marriage, or adoption.

Nonemergency Medical Care

A prisoner may be transferred to a medical facility for treatment that is **not** available in the DC Department of Corrections. Medical Personnel must certify the need for the medical treatment. The **Institution Warden** is authorized to approve these escorted trips.

Emergency Medical Treatment

A prisoner may be granted permission to obtain necessary medical care which is **not** available at the DC Department of Corrections and must be rendered immediately to prevent possible death or serious injury. If practical, competent medical personnel should verify the need for this treatment. The **Institution Warden** or **Senior Correctional Officer** on duty is authorized to approve these escorted trips.

Community Service Programs

Prisoners who have a minimum custody status and pose no reasonable threat to the public may

be given permission to participate in approved community service programs. Some examples of community service programs are: (a) religious services; (b) work details; (c) civic and community group events; and (d) recreational events. The **Director of the Department of Corrections** must approve these escorted trips.

Athletic Trips

Prisoners may be allowed to participate in approved athletic events at other correctional institutions. Athletic trips to other institutions may be approved by the **Institution Warden** as long as the visiting institution does not have a higher security level designation. In other words, if you are at the Correctional Treatment Facility ("CTF", a medium security facility), you cannot participate in an athletic event at the Lorton Minimum Security Annex ("Annex"). Inmates at the Annex, however, can travel to CTF for athletic events. In addition, inmates at the Annex may seek permission to participate in community athletic events.

PROCEDURES

Arranging an Escorted Trip

To take advantage of an escorted trip, you must request your case manager or other Department of Corrections employee to submit a written request for an escorted trip. Escorted trips are rarely granted and requests often take a long time to be processed. If possible, you should plan ahead and give your case manager or other corrections employee plenty of time to process the paperwork through the proper chain of command.

Scheduling

Normally, an escorted trip will be scheduled for no longer than two hours. This two-hour period does **not** include travel time. For example, if it takes 20 minutes to travel to the community service program in which you are participating, you still will be permitted to spend a full two hours at the program. The 20 minutes of travel time should not be deducted from the time spent at the activity. An escorted trip will usually be scheduled between 9:30 a.m. and 4:00 p.m. If circumstances require the trips to be scheduled after 4:00 p.m., however, arrangements can be made to accommodate you.

SECURITY PROCEDURES

You will be strip searched prior to your departure and immediately upon your return to the facility. However, minimum security inmates will probably not be strip searched prior to their departure.

If your custody classification is "close," "maximum," or "medium" you will be escorted in a security vehicle, unless you must be transported in an ambulance. A minimum of **two** armed correctional officers will escort you to your destination. You will be placed in handcuffs and leg irons unless the Institution Warden or the institution's Officer–In–Charge authorizes a reduction in restraining equipment to handcuffs upon arrival at your destination. These reductions are rarely authorized and then only in cases of medical emergency. However, if your custody classification is "medium," the Transport Administrator or Institution Warden **may** authorize one armed correctional officer to escort you. "Minimum" security inmates will be escorted by one armed correctional officer or other department employee. Handcuffs or leg irons should not be used to restrain you if you have a minimum security classification and are going out on an escorted trip.

FOR FURTHER INFORMATION

For more information on escorted trips, see DC Department of Corrections **Department Order No. 4910.1D**, dated November 15, 1991. The Department Orders should be available at the law library.

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IX. SURVIVING THE PAROLE PROCESS

INTRODUCTION

The District of Columbia Parole Board is created under DC code § 24–201, and is responsible for:

- Deciding whether to grant or deny parole;
- Establishing the conditions for parole;
- Supervising persons who are on parole; and
- Making decisions concerning the revocation of parole.

All prisoners serving a sentence longer than 180 days, or sentenced under the Youth Rehabilitation Act, are eligible for parole. Actions taken by the Parole Board are guided by two factors: (1) the best interests of the prisoner or parolee; and (2) the safety of the community. In order to provide regularity to the parole process, the Parole Board developed a set of regulations that describe the procedures and factors that are used to make parole decisions.

It is very important that you understand the parole and sentencing process. If you know the factors that go into a parole decision, you can take steps that will increase the chances that you will be granted parole. In addition, both the Department of Corrections and the Parole Board make errors in calculating a prisoner's sentence and eligibility for parole. Only by being familiar with the Parole Board's regulations can you spot these problems and have them corrected. Therefore, it is a good idea for you to read this chapter along with Chapter II, "Sentence Computation."

The Parole Board's regulations are found in Title 28 of the District of Columbia Municipal Regulations beginning at section 200. You may obtain a copy of these regulations either directly from the Parole Board or from one of the prisoners' rights organizations listed at the end of this chapter. The regulations should also be in your prison law library. If they are not in the law library, you should ask the librarian to obtain a copy. Study these regulations carefully. They give you the information necessary to obtain the most favorable parole determination. If you have any questions after you have read the regulations, contact one of the prisoners' rights organizations.

The Parole Board's offices are located at 717 14th Street, NW, Washington, DC, 20001. After you are granted parole, you must go to another office to see your parole officer. That office is located at 300 Indiana Avenue, NW, Washington, DC 20001.

WHEN AM I ELIGIBLE FOR PAROLE?

Parole Eligibility Date

You are eligible to be released on parole after you have completed your minimum term of incarceration less any good time that you have earned. This is referred to as your "parole eligibility date." For example, if you are serving a two to six year sentence, you can be paroled any time after you have served two years, less "good time." Prisoners who are serving a sentence with mandatory minimums are not eligible for "good time." Thus, if you are serving a mandatory 20 months to five years sentence for certain drug offenses, you cannot be credited "good time" on the minimum sentence ("good time" credits cannot reduce the 20 months, but they can reduce the 5 year maximum sentence).

A number of recently enacted laws may have a significant impact on your parole eligibility date. For example the "Truth in Sentencing Act" of 1994 eliminates institutional good time credits for prisoners who committed offenses on or after June 22, 1994, significantly delaying their release. Additionally, the D.C. government

repealed a law requiring mandatory minimum sentences for non-violent drug offenses. This means that if you were convicted of a non-violent drug offence after May 25, 1995, you are not subject to mandatory minimum sentencing guidelines, and you may be eligible for parole much sooner than you would have been in the past.

Mandatory Release Date

If you have not been paroled before, the Parole Board must release you on parole once you have served all but six months of your maximum sentence, less any good time.

Early Parole

A prisoner may be considered for parole up to six months prior to her or his parole eligibility date. The term "early parole" merely means that your parole release decision will be made early, not that you will be released on parole early.

Typically, you will not be considered for early parole unless you have a minimum custody classification, a good prison discipline record, and prison officials recommend that you be granted parole. Generally, you must have a very low score on the Point Assignment Grid before the Department of Corrections will recommend that you be considered for early parole.

If you are granted early parole, you may be released as soon after your parole eligibility date as a parole plan can be prepared for you. You should start to arrange for a place to live and a job as soon as early parole is granted so that your release will not be delayed.

A person who has been granted early parole will ordinarily spend the last six months of her or his sentence in a halfway house. This is called "parole through work release." Often, the Department of Corrections fails to transfer a prisoner to a halfway house after a grant of early parole. Since successful completion of work release is usually a requirement for early parole, not going to the halfway house may delay your release. If you are not sent to the halfway house after being granted early parole, you should file an IGP form immediately (see Chapter VI, "Dispute Resolution"). In addition, you should notify the Parole Board that you were not transferred to a halfway house so that the Board members will know why you did not meet the requirement that they imposed on you.

Reduction in Minimum Sentence

Prisoners, who through program participation, establish that they have been rehabilitated may have their minimum sentence reduced. Unfortunately, reductions in minimum sentences are extremely rare, usually only two or three a year. To have your minimum sentence reduced, the Department of Corrections must make a recommendation to the Parole Board and the Parole Board must make a motion to the judge who sentenced you. Thus, you will not be granted a reduction in your minimum sentence unless the Department of Corrections, the Parole Board and the sentencing judge all agree.

If you think that you are eligible for a reduction in your minimum sentence, you should speak with your case manager.

Compassionate Release

On May 15, 1993, the Medical and Geriatric Parole Act became law. This statute allows certain prisoners with severe medical conditions to be released on parole prior to their parole eligibility date. The statute applies to prisoners who are: (1) permanently incapacitated; (2) terminally ill and within six months of death; or (3) over 65 and disabled by conditions related to age. Persons who are serving a mandatory minimum sentence, or who suffered from the qualifying

physical condition at the time of sentencing, cannot be paroled under this law.

If you think that you may be eligible for parole under this law, you may apply by writing to: Margaret Quick, Chair of the Parole Board, 717 – 14th Street, NW, Suite 200, Washington, DC, 20001; and William Plaut, Deputy Director for Operations, Department of Corrections, 1923 Vermont Avenue, NW, Washington, DC, 20001. Your letter should clearly state that you are seeking compassionate release, describe your condition in as much detail as possible, explain when you developed the condition — emphasizing that you did not suffer from the condition at the time of sentencing — and indicate that you are not serving a mandatory minimum sentence. Copies of your letter should be sent to both the Parole Board and the Department of Corrections.

For more information on compassionate release, you should contact either the Board of Parole or the D.C. Prisoners' Legal Services Project, 1400 20th Street, NW, Suite 117, Washington, DC, 20036, (202) 775–0323.

PREPARING FOR YOUR PAROLE HEARING

It is important that you take an active role in preparing for your parole hearings. Do not rely on your case manager to take care of everything for you. Frequently, case managers neglect to prepare necessary materials because they have such a heavy case load. Know important deadlines, make sure your materials are prepared ahead of time, and continue to follow up with your case manager to make sure your paperwork is submitted on schedule.

Preparing your Parole Packet

A parole packet is the set of materials that have been collected by your case manager and submitted to the Parole Board. The packet contains a copy of your pre–sentence investigation report, a report written by your case manager concerning your progress while incarcerated, and a recommendation concerning your parole from the D.C. Department of Corrections.

Your parole packet will not contain copies of certificates of program completion, although your complete file will be available at your hearing. If you want the Board to consider additional materials, you must submit them directly. It is, therefore, extremely important that you keep copies of all certificates of program completion, letters of commendation, or other documents that may assist you in obtaining parole. You should also send a copy to a family member or friend in case your copy is lost. Do not assume that your institutional file contains these documents. Materials of this sort are frequently misfiled or misplaced. Bring extra copies of these documents to your parole hearing and give them to the hearing officer. Family members, friends, and references can also submit letters or other materials directly to the Parole Board.

The Department of Corrections is supposed to submit your parole package to the Parole Board at least 45 days prior to your parole eligibility date. You should check with your case manager two months prior to your parole eligibility date to ensure that the package is prepared in time. Once your case manager tells you that the package was sent to the Parole Board, call the Parole Board to make sure that it was received. Parole packages frequently get "lost," causing delays in the scheduling of parole hearings. If there is any delay in submitting the packet, you should file an IGP form (see Chapter VI, "Dispute Resolution").

Salient Factor Score and Total Point Score

The Parole Board has developed a set of criteria to assist it in making parole determinations.

Numbers are assigned to various factors and a salient factor score is calculated. This score determines whether or not you are released. You want your salient factor score to be as high as possible (10 is the maximum). Your salient factor score is then converted according to the Point Assignment Grid (PAG). You want your PAG number to be as low as possible. A PAG number of 0, 1 or 2 at your initial hearing requires the Parole Board to release you unless there is an exceptional reason not to do so. A PAG number of 0, 1, 2, or 3 should result in your release at a re–hearing. The Parole Board should not deny you parole if you have a sufficiently low number unless unusual circumstances are present in your case. It is important to note that sometimes the classification committee and the Parole Board calculate your score differently. In such cases, the Board's calculation controls.

Your PAG number is affected both by your criminal record and your conduct in prison. If you avoid having discipline charges and participate in rehabilitative programs, you can lower your number by as many as two points.

Calculate your salient factor score before your parole hearing. Be prepared to defend your calculation at the hearing. You can do this by getting a copy of the Parole Board's regulations and completing the forms provided. Hearing examiners and Board members make mistakes, but they will not correct them unless you provide a clear explanation of why they are in error.

Reclassification Hearing

In order to prepare your parole packet, your case manager must convene a classification committee. This committee evaluates whether you are properly classified at your current security level, completes the salient factor score form, and makes a recommendation to the Parole Board. The decision of the classification committee is reviewed by the facility Warden. You should be given a copy of the salient factor score form at this time. If the committee does not give you a copy of the form, you should ask for it. If you disagree with their calculation of your salient factor score, you should immediately advise the committee of the mistake. If they do not correct the mistake, you should file an IGP form (see Chapter VI, "Dispute Resolution").

PAROLE HEARINGS

Parole hearings are those meetings during which the Parole Board considers your application for parole. Sometimes these hearings are with one or several members of the Board. On other occasions, you will meet with a hearing examiner. In rare cases, the Board will hold a hearing "on paper." In these cases, there is no face–to–face meeting and the Board makes its decision based solely on the written information provided. You do not ordinarily have a right to a lawyer at an initial parole determination hearing. Your lawyer can submit a letter to the Parole Board explaining why you should be granted parole. You do, however, have a right to have a lawyer at a revocation hearing.

There are several types of parole hearings. They are described below. Keep in mind that **you should never waive parole**. Sometimes, prisoners are asked to waive parole so that they may complete a drug treatment program or for some other reason. If you do waive parole, your name will be removed from the Parole Board's hearing docket, and you will not be placed back on the docket unless your case manager writes to the Parole Board and makes a request on your behalf. This is likely to significantly delay your parole hearing and your ultimate release. Therefore, despite what your case manager tells you, it is <u>never</u> to your advantage to waive a parole hearing.

Although there is no formal process to appeal the Parole Board's decision, you can request that your case be reconsidered by writing to the Chair of the Parole Board. Your letter should be polite and contain a clear explanation of why the Board's decision was wrong. Include any supporting documents in your possession. Always send copies of your documents and keep the originals in case the copies are lost.

Initial Hearing

Department of Corrections regulations require that the Parole Board make a parole determination concerning every prisoner at least ten days prior to each prisoner's initial parole eligibility date. This decision is made at the initial hearing. The Department of Corrections and the Parole Board frequently do not hold parole hearings before the required deadline. However, a recent decision in *Ellis v. District of Columbia* requires the Parole Board to hold a hearing sufficiently prior to a prisoner's parole eligibility date such that the prisoner could be released on that date. The only way to ensure that your case is heard on time is to find out your parole eligibility date. Once you are within 30 days of that date, you should contact your case manager and the Parole Board to request your case to be heard. You should follow up frequently until your case is scheduled on the Parole Board's docket.

You will not receive advance notice of your initial hearing. Typically, on the day of the hearing, you will be told to report to the area in which hearings are being held. Therefore, prepare any information that you want to present to the Board well in advance and keep it ready for the hearing. Make copies of all documents that you intend to use at the hearing for your records.

Finally, initial parole hearings are frequently delayed when a prisoner is transferred and the Parole Board is not notified. If you are transferred close to your parole eligibility date, arrange to meet with your case manager immediately. You should also notify the Parole Board of your new location.

Re–Hearing

If you are not granted parole at a hearing, the Parole Board will give you a date for a re–hearing. This is called a parole "hit" or "set off." The Parole Board is not required to hear you on the date given and the Board will not re–hear your case until your case manager prepares a new progress report. You should contact your case manager at least 90 days prior to your re–hearing date and request that the packet be prepared. If you do not make certain that s/he prepares the report, your hearing might be delayed.

If you receive a parole "hit" that you believe is too long (some people receive hits as long as five years), you may request an earlier re–hearing date in writing to the Chair of the Parole Board. You may want to wait to request an earlier date until you have completed some rehabilitative programming. In any event, you should explain to the Chair why your case should be considered prior to your re–hearing date.

Revocation Hearing

Once you have been granted parole, you are subject to various conditions. These conditions usually require you to refrain from future law violations, maintain a job, report to your parole officer, abstain from illegal drugs, and notify your parole officer if you move. If your parole officer suspects that you have violated any of these conditions, s/he will have the Parole Board issue a warrant for your arrest. After this warrant is executed (either by your arrest or, if you are already in custody, by the warrant being served on you), the Parole Board will hold a hearing. This hearing should occur within 30 days of the

warrant's execution. At this hearing, the Board can decide to take no action, revoke your parole and return you to prison or jail, or revoke your parole and immediately put you on parole again and release you to the community. You may have a lawyer with you at your revocation hearing. If you are unable to obtain a lawyer, however, the Board will not appoint a lawyer to represent you. If you need a lawyer, you should contact Hastings Jones, D.C. Public Defender Service, 451 Indiana Avenue, NW, Washington, DC, 20001, (202) 628–1200.

Rescission Hearing

If you are in a halfway house and are granted parole, but engage in misconduct prior to actually being released on parole, the Parole Board may rescind its grant of parole. This means that you have lost the right to be released on parole until the Board gives you another parole grant. It is important to remember that revocation and rescission are different. Revocation applies to persons who are already on parole. Rescission applies to persons who have been granted parole but have not yet signed their parole certificate. You have many more rights at a revocation hearing than if your parole is being rescinded. Rescission hearings frequently occur "on paper," meaning you will not have an opportunity to present your side of the story.

IF YOU ARE GRANTED PAROLE

Before being released on parole, you must sign a document indicating that you agree to certain conditions. For example, all parolees are required to maintain employment, submit to urinalysis, remain drug free, etc. This document is called the parole certificate. Even if the Parole Board has granted you parole, you cannot be released until you sign a parole certificate. If you violate any of the terms contained in the parole certificate, or get arrested on a new criminal charge, the Parole Board can revoke your parole. If your parole is revoked, you may be re–incarcerated.

Day Reporting Program

On December 1, 1994, the DC Board of Parole instituted a "day reporting program." This program requires that all prisoners released on parole or mandatory release register with the police department. If you are currently on parole, but were released prior to December 1, 1994, your parole officer should instruct you to register with the police department at your next scheduled meeting.

Upon your release from prison, you are required to report to your parole officer within 72 hours. At this initial meeting, your parole officer should instruct you to report to the police department nearest your place of residence within 24 hours. You should receive a list of district police precincts to help you locate the one nearest you. Your parole officer will require you to sign a document stating that you understand the registration requirements.

When you report to the police department, you must bring your DCDC identification card with you. It is, therefore, very important that you retain your ID card when you are released. Once you have registered, you must return a completed registration form to your parole officer.

Failure to register with the police department constitutes a parole violation, which carries a possible penalty of incarceration. If you do not follow the procedures for registering with the police department, you may have your parole revoked and a warrant may be issued for your arrest.

Therefore, it is extremely important that you register with the police department within 24 hours

of meeting with your parole officer, and return a completed registration form to your parole officer in a timely manner.

CONCLUSION

The parole process is complex and often appears to be arbitrary. There are, however, three things you can do to improve your chances of being granted parole:

- Participate in programs. This will both lower your PAG score and make you a more attractive risk for the Parole Board. Participate in any program that is available, even if you think that the program may be of little real benefit to you.

- Do not get disciplinary charges. Every disciplinary charge hurts your chances of being granted parole.

- Learn the parole regulations. They will help you decide how best to conduct yourself in prison and make you a better advocate at your parole hearing.

ORGANIZATIONS TO CONTACT

D.C. Prisoners' Legal Services Project
1400 20th Street, NW
Suite 117
Washington, DC 20036
(202) 775–0323

National Women's Law Center
Women in Prison Project
11 Dupont Circle, NW
Suite 800
Washington, DC 20036
(202) 588–5180

Prisoners' Rights Program
DC Public Defender Service
P.O. Box 47
Lorton, Virginia 22079
(703) 643–1034
(202) 628–1200

Bill Earhart
Attorney Adviser
Legal Assistance Branch
DC Superior Court
515 5th Street, NW, Room 101
Washington, DC 20001
(202) 879–2833

X. HALFWAY HOUSES

INTRODUCTION

A halfway house, also known as a community correctional center (CCC), allows prisoners who are on work release to reside in the community in a facility run by the Department of Corrections. Generally, people sentenced to halfway houses have either committed minor crimes but do not require incarceration, or are sent there as a condition of their parole. Therefore, halfway houses provide both an alternative to incarceration and a method of easing prisoners' transitions to the community in preparation for their release.

There are three halfway houses for women in the DC correctional system: (1) **Extended House** (housing 80 women in Northeast DC); (2) **Trudie Wallace House** (housing 22 women in Northwest DC); and (3) **Discovery Manor** (housing 22 women in Southeast DC). The Trudie Wallace House and Discovery Manor are both run by the **Washington Halfway House for Women.** The regulations for these three halfway houses are substantially the same. An additional halfway house, **Community Correctional Center 2** (located in Northwest DC), serves as the aftercare placement for women in the Intensive Substance Abuse Program at the Correctional Treatment Facility. CCC2 houses 42 women and is governed by different regulations than the other halfway houses.

The DC Department of Corrections contracts with independent agencies to run the halfway houses. Although these facilities are in the community, they are still under the direction of the DCDC. As the numbers indicate, there are very few beds in the community correctional system, and many more women are eligible for placement in halfway houses than there are beds available.

While halfway houses provide a far preferable alternative to incarceration, it is important to remember that if you are admitted to a halfway house you are not free do as you please. Although you can enjoy many of the benefits of "freedom," you are still under the jurisdiction of the DC Department of Corrections, and there are many rules to follow. If you do not comply with halfway house rules, you will lose your privileges, and may even be sent back to prison. ***Moreover, if you leave a halfway house without permission, you may be charged with escape, which carries a maximum sentence of 5 years.*** Your continued residence in a halfway house, therefore, depends on your continued cooperation with house rules and requirements. This chapter outlines when you may be eligible to be transferred to a halfway house, and discusses the requirements for remaining there once you are admitted.

CONDITIONS FOR ADMITTANCE

Because of recent reports of widespread prisoner "escapes" and walk–aways from halfway houses, the DC Department of Corrections recently changed its requirements for placing prisoners in halfway houses. Now, the DCDC is unlikely to transfer to a halfway house any prisoner convicted of a violent crime. In addition, anyone who has escaped or walked away from a halfway house in the past is not eligible for halfway house placement. Finally, any prisoner who is awaiting a parole rehearing or forensic evaluation is not eligible for a halfway house, and individuals awaiting parole to an interstate compact agreement must get the approval of the Director of the DC Department of Corrections. The new eligibility requirements are described below.

Misdemeanant

If you have been convicted of a **misdemeanor**, you can only enter a halfway house in one of three ways:

- Your sentence is due to expire within one year **and** the court orders you to the halfway house;
- You have been granted parole to the halfway house (after you have served one third of your sentence); or
- You have been approved for parole without any specific conditions such as medical or mental health treatment.

Non-Violent Crimes

If you have been convicted of a **non-violent** crime, you must meet the following criteria to be eligible for transfer to a halfway house:

- You are within 6 months of a parole hearing;
- You are within 6 months of a parole grant;
- You are within 6 months of a conditional release, or your sentence is due to expire within 6 months; or
- You have been approved for parole without any specific conditions such as medical or mental health treatment.

If you have a prior escape from a halfway house, your application must be approved by the Director of the DC Department of Corrections.

Violent Crimes

If you have been convicted of a **violent crime**, you cannot be transferred to a halfway house unless:

- You have not been denied parole at your most recent parole hearing;
- Your maximum sentence is due to expire in 12 months;
- You are eligible for parole within 12 months;
- You have served at least 90 percent of your minimum sentence;
- You have served at least 12 months of your sentence; or
- The Parole Board sends you there.

In addition, your application must be approved by the Director of the DC Department of Corrections.

Admission Priority

Even if you meet the eligibility requirements outlined above, you will not automatically or immediately be transferred to a halfway house. As previously mentioned, the space in halfway houses is very limited and very much in demand. Some women will have priority over other women, and the order of admittance depends on the type of sentence or parole you have received. Women who are sentenced directly to halfway houses have first priority on beds, and women who have been granted work release by the Parole Board are next in line to be admitted. If beds are available after these women have been placed, the Department of Corrections admits women who are eligible (and whose paperwork has been completed) on a first come, first served basis. As a practical matter, misdemeanants are rarely placed in halfway houses by the Department of Corrections, because by the time they are classified and participate in a few programs, their sentence has expired.

After you apply, be prepared to wait before you are actually placed in a halfway house. There is no established waiting period — some women are admitted immediately, while others must wait for months before they are admitted. If you fall into the category of prisoners who are admitted on a first come, first served basis, your place on the waiting list depends not on when you are eligible for transfer, but when your case manager submits

your application to the Administrator for Community Release Programs (Mr. Noble's office). While your case worker should complete your paperwork and send it to the halfway house prior to your halfway house eligibility date, many case workers are overworked and may not submit the forms as early as they should. As your halfway house eligibility date nears, you may want to talk to your case manager and offer assistance in completing your paperwork.

REQUIREMENTS FOR LIVING IN A HALFWAY HOUSE

Although there are some differences, the rules for both Extended House, Trudie Wallace House, and Discovery Manor are basically the same. These rules are very extensive. The Department of Corrections requires that when you arrive at a halfway house, you receive an orientation package that includes a copy of the rules and regulations. **Read these rules carefully**. If you have difficulty reading, ask for assistance either from a resident you can trust or from a halfway house employee. The halfway house is required to provide you with assistance in reading the rules if you need it. You will be required to sign a form stating that you have read and understand the halfway house rules and regulations. If you have signed this paper and you break a rule, you cannot claim that you did not know the rule existed, or that you did not understand the regulation. Consequently, it is very important to ask questions if you do not understand any of the halfway house rules.

Work and Education Requirements

As a condition of your continued residence at a halfway house, **you are required to seek and maintain employment**. However, you are not required to find a job if you are enrolled in job training or an education program.

Employment

The job counselor and halfway house staff should assist you in your job search. If you do not make reasonable attempts to find a job within 2 weeks of your arrival, you may be subject to disciplinary action. This doesn't mean you have to find work within 2 weeks, just that you must **do your best to find work**. You are generally given 30 days to obtain a job which pays at least minimum wage.

When you find a job, the job counselor will contact your employer to verify that you are, in fact, employed. You must always keep the job counselor informed of your work schedule and where you will be working. Tell the counselor if your work schedule changes. Each week, the counselor will contact your employer to monitor your progress and to make sure you are going to work. If you do not show up for work or are not doing your job, you will be subject to disciplinary action. Failure to maintain or seek employment may be grounds for sending you back to prison.

You must also tell the job counselor how much you are getting paid. Each time you are paid, you must provide the staff with a pay stub or receipt as proof of payment. If you make more than $50 per week, you must contribute $10 per week to the DC Department of Corrections for maintenance of the halfway house. If you feel that contributing $10 a week is too burdensome, you should discuss the extent of your financial obligations with your counselor. You may be able to have the fees waived due to financial hardship. For instance, you may be unable to pay the fee because you must send the caregiver of your four children $40 per week. The counselor must place a formal request to the Assistant Director of Community Services for approval.

Prior to receiving your first paycheck, you can request a small loan (usually up to $20) from the

halfway house to cover the expense of work-related items such as clothing and toiletries, meals during working hours, or transportation to and from work. You must assume full responsibility for repaying the loan when you receive your first paycheck.

Education or Vocational Training

If you are not employed, you must be enrolled in an education program or receive vocational training. The Trudie Wallace House holds G.E.D. classes on site so that residents can work towards obtaining their high school equivalency degree. You can also enroll in vocational or education classes in addition to holding employment.

If you choose to participate in education or job training instead of obtaining employment, you may only be permitted to participate in those training programs which also provide you with a regular income such as a salary, stipend, or grant. Therefore, you may not be allowed to participate in education or job training if you cannot support yourself. If this is a concern, you should think about obtaining a part-time job in addition to your studies.

Treatment and Support Services

Counseling Services

Within five days of arriving at the halfway house, you will be assigned a counselor who will work with you to create a program plan which outlines the goals you hope to achieve while you are living at the halfway house. You should then be reviewed on a weekly basis to determine whether you are making progress towards achieving these goals. You will be evaluated for your behavior in the halfway house, personal adjustment, progress in drug treatment and counseling, community adjustment, and your employment status. Your progress will also have an effect on the number of social passes you receive.

Your counselor should also provide you with psychological counseling services and emotional support, or refer you to other counseling services such as drug treatment or family therapy. Additionally, your counselor should connect you to community resources such as housing or public benefits to prepare you for your release. Your counselor may also meet with your relatives so that they can assist you when you are released. The counselor should also help you formulate a budget to help you manage your money. Unfortunately, many counselors do not provide these services, either because they are not trained to do so, or due to a lack of desire or resources. If you are not receiving these services, do not get discouraged. Look for other sources of support through groups such as Narcotics Anonymous and Alcoholics Anonymous, and through social support agencies such as Family and Child Services and community mental health centers.

Medical Care

While you are at the halfway house, your medical and dental care will be provided by D.C. General Hospital. If you need to see a doctor or dentist and it is not an emergency, you must obtain a "D.C. General Referral Form" from the senior staff member on duty. This referral form will describe your general complaint and will authorize your visit to the hospital. Bring this referral form with you to the hospital. When you return to the house, give it to the halfway house staff for placement in your file. If you are authorized to leave the halfway house to receive medical care, you must go directly to the hospital. The halfway house staff will call the hospital to determine when you arrive and when you leave. If you do not go directly to the hospital and return immediately to the house when you are discharged, you will be placed on escape status.

If you require emergency medical care while you are at the halfway house, the staff will have you transported to the nearest available hospital. If you require emergency treatment while you are in

the community, you should go to the nearest hospital, and contact the house staff as soon as possible. If you enter a hospital other than D.C. General Hospital or without staff authorization **and** your condition is determined **not** to be an emergency, you will be responsible for the full cost of treatment and transportation. Therefore, if your condition does not require emergency care, be sure to obtain authorization before you seek medical treatment, and only go to D.C. General Hospital. Also, be sure your medical condition is an emergency before you seek unauthorized treatment.

Drug Treatment

The halfway house is supposed to provide drug treatment services to all residents who require or request it. If you would like to voluntarily enter drug treatment, discuss this with your counselor. Your counselor will tell you what resources are available both at the halfway house and in the community. Halfway houses generally host Narcotics Anonymous meetings in the evenings, and your counselor can refer you to community–based treatment services.

Financial Assistance

While you are at the halfway house, you will be required to keep a monthly budget. The counselor will assist you in developing financial goals and adhering to your budget. For instance, while you live in the halfway house, you will have personal and employment related expenses such as transportation, clothing, and meals. You may also have to provide financial support to your children. Additionally, once you are employed, you will probably have to pay up to $10 per week to the halfway house for rent. In addition, your halfway house may require you to place 20% of your earnings in a savings account. If the house does not require you to keep an account, it is still a good idea to open one yourself. This account will help you cover the expenses you will face when you leave the halfway house, and will help you to develop habits which will keep you economically independent once you are released.

House Privileges

Individuals who obey all the rules of the halfway house will be granted certain privileges such as social passes, and will be allowed to have visitors on a regular basis. These privileges are rewards for good behavior. However, you are not entitled to these privileges, and if you violate the house rules, they may be taken away.

Social Pass Program

Pass privileges allow you to visit with family and friends outside of the halfway house, and allow you to take part in community activities and social events. Resident administrators can grant social passes at their discretion, and may grant you passes based on your behavior at the halfway house, your employment record, your education status, and your overall positive program participation. You may be eligible for social passes if you fulfill the following criteria:

- You work and/or participate in education or vocational training for a total of 32 hours per week;
- You adhere to center rules and regulations;
- You do not use drugs or alcohol;
- You take care of your financial obligations;
- The staff has verified that you have a place of destination such as a private residence in the community or are attending a community social event; and
- You have progressed toward achieving the goals listed in your program plan.

Different types of social passes allow you to leave the house for different lengths of time. Passes last from five hours to 40-hour weekend passes. The number of passes you are granted in a week and the duration of these passes depend on how many of the 6 criteria you fulfill. If you want to determine the type of pass for which you are eligible, refer to the house regulations.

When you receive a social pass and are allowed to leave the halfway house, you are still required to obey the halfway house rules. You **must return** to the house by curfew. You are not allowed to leave the metropolitan Washington, D.C. area and you may not use alcohol or drugs. If you violate any of the rules or conditions of your social pass, they can be suspended and you will temporarily lose your pass privileges. You may even be sent back to prison.

Visitors

Visitors may come to the halfway house, but they must stay in the designated visitor's area and may not go into residents' bedrooms. Each house has its own visiting hours, and they are strictly enforced. All visitors may be searched before they are admitted, and they must sign in when they arrive.

House Rules

It is very important to follow the house rules while you are living at the halfway house. If you do, you will be allowed house privileges such as social passes and visitors on a regular basis. However, if you break the rules, you will lose house privileges, and you may have disciplinary reports filed against you. If you commit severe offenses you may even be sent back to prison.

Documenting Your Whereabouts

The staff of the halfway house must know where you are at all times. You must sign in and out every time you leave or enter the building. This includes trips to your job, a visit to the hospital for medical treatment, and appointments with your lawyer. When you sign out, you will be required to provide both a destination and your expected time of return. If you are late in returning to the halfway house, you will be penalized. For instance, you may lose privileges such as social passes, use of the telephone, etc. If you leave without permission **and** your whereabouts are unknown, you will be considered a potential escapee. If you have signed out and you are more than fifteen minutes late in returning to the halfway house, you will also be considered a potential escapee. If you are more than two hours late, you will be placed on escape status. **ESCAPE OR ASSISTING SOMEONE ELSE TO ESCAPE COULD LEAD TO REINCARCERATION, AND POTENTIALLY CARRIES AN ADDITIONAL FIVE YEAR PRISON TERM.** If you find that you cannot avoid being late, **it is extremely important to telephone the house staff and explain your situation.** This way you may be able to avoid being placed on escape status.

Center Searches

Halfway houses are searched on a monthly basis for contraband or to locate lost or stolen property. The staff can also conduct a search any time they suspect that property has been stolen or that contraband is on the premises. Only staff members are allowed to conduct a search. They can search through your belongings whether or not you are present. If you are not present, two staff members must conduct the search. During a search, staff members must take care not to disturb or damage your property. Everything should be returned to the place where it was found. If the staff accidentally damages your property during a search, they are required to report the damage immediately to the Senior

Official on duty. If contraband is found among your things, it will be removed and forwarded to the Center Administrator, and you will be subject to disciplinary proceedings. If the staff suspects that you may be trying to sneak contraband into the house, they may conduct a body search.

Drug Violations

Your stay at the halfway house depends on you remaining drug free. Upon your arrival, you will be tested for drugs. In addition, you may be randomly tested for drugs during your stay at the halfway house. If you test positive for drug use, you will be subject to disciplinary proceedings, and you may lose privileges such as social passes. After your first violation, you will be required to attend nightly Narcotics Anonymous meetings. If the house provides other drug treatment services, such as individual counseling, you will be required to attend them as well. You may also be required to attend drug treatment programs in the community. In addition, you will be placed on restriction for seven days, and you will lose your social and visiting privileges.

If you test positive for drugs for the second time, you will be placed on more severe restrictions. If you test positive for a third time, you will be placed on administrative hold. This means that you cannot leave the halfway house for any reason. There is a strong likelihood that you will be sent back to prison after your third violation. **HOWEVER, KEEP IN MIND THAT ALTHOUGH YOU SEEMINGLY HAVE THREE CHANCES, YOU CAN ACTUALLY BE REMOVED FROM THE HALFWAY HOUSE AND RETURNED TO PRISON FOR A DRUG VIOLATION ANYTIME AT THE DIRECTOR'S DISCRETION.**

You can also be sent to prison if you refuse to provide a urine sample upon request, or if you violate drug testing procedures (for example, switching urine samples). Finally, if you are requested to submit a urine sample and fail to do so within a reasonable period of time, you may receive an Incident Report.

Disciplinary Actions

The following sections provide a **brief** outline of the disciplinary process in halfway houses. Because the disciplinary process in the halfway house is very similar to the prison disciplinary process, this section will frequently refer you to Chapter V, which discusses disciplinary reports in prison. **It is very important that you do not rely on the information provided in the following sections alone, but read them along with Chapter V.** If you have any questions, you should contact the Prisoners' Rights Program, Public Defender Service, P.O. Box 47, Lorton, Virginia, 22079.

Incident Report

If you commit a minor offense (a Class III offense), an Incident Report will be filed against you. (For a list of Class III offenses, see Chapter V.) Much like in prison, Class III offenses do not require you to appear before the Adjustment Board. Staff members can therefore file an Incident Report and penalize you without referring you to the Adjustment Board. If you commit a Class III offense, you may receive any of the following penalties:

- reprimand and warning;
- restitution, where appropriate;
- confiscation, where appropriate; or
- restriction (the temporary loss of house privileges such as visitors and social passes).

Disciplinary Report

If you commit a more serious offense (a Class I or Class II offense), a disciplinary report will be

filed against you. Class I and II offenses could result in criminal prosecution. Due to their severity, if you are charged with a Class I or II offense, you must appear before the Adjustment Board and can be sent back to the Jail or CTF pending the hearing. It is advisable for you to have a lawyer represent you when you appear before the Adjustment Board if the offense could result in a criminal prosecution. If you are found guilty of a Class I or Class II offense, you may be subject to more severe penalties, including restriction or being sent back to prison.

The Disciplinary Report procedure in a halfway house is the same for the procedure in prison. Therefore, you should read Chapter V, "Disciplinary Reports", to learn about the disciplinary report process, including your rights.

Expulsion

The following list includes **some** of the behaviors that may result in your being sent back to the prison:

- Threatening or committing a violent act against another resident or staff member;
- Possessing contraband (alcohol, drugs or weapons);
- Gambling;
- Engaging in sexual activity on the premises;
- Being rearrested or committing a crime;
- Escaping or aiding another resident to escape;
- Failing to seek employment; or
- Failing to submit to a drug test or interfering with drug testing procedures.

Inmate Grievance Procedures

While you are in the halfway house, you can file a complaint concerning halfway house policies, procedures, and conditions. In order to file such a complaint, you must file an Inmate Grievance Procedure (an IGP). Refer to Chapter VI, "Dispute Resolution", for information on IGPs.

CONCLUSION

When you arrive at the halfway house after being incarcerated for any period of time, it may be easy to forget that you are still under the jurisdiction of the D.C. Department of Corrections. Upon their admittance to a halfway house, some women become so excited by the prospect of freedom that they forget to pay attention to the house rules. However, it is always important to remember that your continued stay at the halfway house depends on your determination to follow the house rules and regulations. If you do not seek employment or obey the house rules, you may be returned to prison. Therefore, if you are lucky enough to be transferred to a halfway house, take advantage of your freedom, but most importantly, follow the house rules.

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XI. CHILD CUSTODY CONCERNS FOR INCARCERATED WOMEN

INTRODUCTION

A serious concern for incarcerated women is the custody and care of their children. Many women lose control over what happens to their children while they are incarcerated. This may be the first time you are separated from your children, or your children may have been in someone else's care, such as a relative or foster parent, when you entered prison. Alternatively, you may give birth while incarcerated. In any case, incarceration can have a significant impact on whether you will ultimately regain physical and/or legal custody of your children once you are released.

This chapter provides information on the child custody issues typically confronting incarcerated women, namely the loss of custody through a legal proceeding either in the Domestic Relations or the Abuse and Neglect branch of the court.

CHILD CUSTODY

There are two kinds of custody, informal and formal. Informal custody refers to a situation where a mother arranges for either a relative or friend to care for her children while she is incarcerated. This arrangement does not involve the court system. Informal custody is arranged between the parties, and may include assigning rights to receive public assistance on the child's behalf, and/or granting a power of attorney giving the caregiver authority to make certain decisions regarding the child's education and medical care. The caregiver in an informal custody arrangement has only physical custody of the children and is not their legal custodian. Formal custody, on the other hand, refers to a court award of either permanent or temporary legal custody to a relative, friend, or foster parent.

You should note, however, that your ability to make child custody decisions may depend on the legal status of the father of your child. If you were married to the father of your child when you gave birth, or if you were unmarried but paternity has been legally established, then you may not be able to make independent decisions regarding child custody without the father's consent. If you were unmarried at the time of the child's birth and paternity has not been legally established, then the father cannot prevent you from making child custody decisions or assert any rights to the child. The father always has the right, however, to establish paternity at any time in order to assert parental rights.

Informal Custody

Informal custody arrangements allow parents to decide who will care for their children in their absence. Parents have a constitutional right to raise their children and make decisions regarding their children's welfare. This includes the right to make decisions about who will raise their children. Therefore, if a relative or friend agrees to take care of your child, you should be able to arrange this freely, without any court involvement. This arrangement will be honored as long as the government does not find the caregiver you choose to be unfit to care for the child. If, however, informal custody cannot be arranged, the court may grant the custody of your children to a relative, or place the children in foster care.

If you give birth while incarcerated and would like to release the newborn to a friend or relative, D.C. General Hospital has forms that you can sign to release the baby from the hospital to the chosen caregiver. Again, this is an informal custody arrangement because there is no court involvement.

In order to safeguard your right to the custody of your child in an informal arrangement, you should maintain contact with your child as much

as possible during your incarceration. Ask the caregiver to bring the child for visits, and send letters and cards to the child. Even though this is an informal arrangement, be aware that the caregiver could eventually go to court and file for legal custody without your consent.

Caregiver Powers

- **Powers of Attorney**

  Leaving your child in the care of another without formal legal arrangements makes it difficult for that person to act as a substitute parent and handle matters involving the child's medical care or education. Therefore, it may be wise for you to arrange for that person to have **temporary custody of the child,** or to give the caregiver **a limited power of attorney.** A power of attorney is a document signed by you that gives someone else legal authority to make decisions concerning your child on your behalf. A new law also allows parents to sign a **notarized statement** authorizing the caregiver to make decisions about the child's medical and educational needs. The organizations listed at the end of this chapter can assist you with preparing these documents.

- **Public Benefits**

  Children in the care of another may also be entitled to public assistance or help in securing income support. For example, the child may be entitled to Aid to Families with Dependent Children (AFDC), Women, Infants and Children (WIC) or services to help obtain child support from the non-custodial parent. (See Chapter XVIII, "Public Benefits.") Often, the person who has physical custody of a child may receive benefits on the child's behalf. It is not necessary for the caregiver to have a legal document saying s/he is the custodian of the child. S/he only has to prove that s/he has physical custody of the child. Although the children may be legally entitled to these benefits, many caregivers, whether a relative or a friend, have found it difficult to obtain these benefits in practice. Contact one of the organizations listed at the end of this chapter if the guardian of your child encounters difficulty obtaining public benefits.

Regaining Custody of Your Child

Since there is no court order in informal custody arrangements, you have the right to get your children back when you are released without taking legal measures. Hopefully, in an informal situation the caregiver wants you to be reunited with your child. This, however, does not always happen. Sometimes, custody struggles arise even out of informal arrangements. For example, sometimes relatives or friends become attached to the child and may sue for legal custody or start adoption proceedings without your consent.

As a natural parent you have a greater right to your child than a non–parent. But if you end up in court, you must prove that you are a good parent and that you are able to care for your child's physical and emotional needs. This also means that before you attempt to reclaim custody of your child, it is in your best interests, as well as the child's, to have both a safe place to live and the ability to support the child financially and emotionally. It is probably in your best interest to avoid trying to prove that the other person who wants custody is unfit, unless it is absolutely necessary to regain custody of the child. You should focus on convincing the court that you are a better caregiver for the child and that as the child's natural parent, you should have custody of the child.

Legal Custody

Legal custody, sometimes called "formal custody," exists when a specific court decision awards cus-

tody to a particular person, generally one of the parents. Increasingly for incarcerated women, the other parent is not available to assume custody of their children. Instead, a woman's parents or other relatives or friends usually get legal custody of her children. The father's family may also obtain custody of the children.

You can lose both physical and legal custody of your child in three situations:

- When the court awards legal custody to the father, grandparent, or other interested party in custody proceedings;
- By voluntarily giving up your parental rights; and
- Through termination of parental rights due to child abuse or neglect.

Custody Proceedings Initiated by Father, Grandparent, or Other Interested Party

The father of the child, a grandparent, or someone else who has an interest in the child, such as someone who has informally cared for the child, may start proceedings to obtain custody of your child. If the court finds in the third party's favor, it will grant him/her formal custody of the child. In these proceedings, the court is required to make a decision about child custody based on the "best interests of the child." The court is most concerned that the child lives in the home providing the care and attention that s/he needs. One important factor that the court considers is how long the child has been with the present caregiver. The longer a person has cared for the child, the less willing the court is to remove the child from that home. This is because children need to grow up in a stable environment and consistency in their lives is very important.

You do not have an automatic right to counsel in a custody trial. However, you should send a letter to the judge or clerk of the court for placement in the court record indicating that you are challenging the custody claim and want an attorney. The court will note your interest and may appoint a lawyer for you. Even if there is a change in custody, you will probably retain visitation rights. You should require the court to enter a schedule for visitation. Often the legal custodian refuses or frustrates visitation. If this situation occurs, ask the court to compel visitation. Again, the court uses "the best interests of the child" standard in determining visitation rights.

You should note that since you are legally responsible for the financial needs of your child, you may be required to pay child support to the custodian of your child.

Voluntarily Giving up (Relinquishing) Parental Rights

You may also lose legal custody of your child by voluntarily giving up your parental rights. The only legal way to do this is by signing a **Relinquishment Form**. This is a **permanent** legal document and once it goes into effect, **you will not have any parental rights**, including the right to visit the child or to choose his or her name or religion. **Therefore, if you may want custody of your children at some point after you are released from prison, you should NOT sign this form.**

This form can be signed before birth, but cannot be signed within the first 72 hours after birth. The signed form can only be received from you by the Department of Human Services (DHS) or a licensed child-placing agency. The agency is required to notify you before accepting the form that you are relinquishing your parental rights, and to provide counseling with a social worker. **You can revoke your Relinquishment of Parental Rights by writing to the agency within ten calendar days after signing the form.**

CHILD ABUSE AND NEGLECT

A formal custody situation may also arise when your children are placed in the abuse and neglect system. Sometimes children are placed in the abuse and neglect system when their mother is incarcerated without informally arranging for custody. This often happens when an incarcerated mother does not have anyone to designate as a caregiver. Other times children are in the abuse and neglect system because of a parent or caregiver's failure to provide for the needs of the child as required by law. The fact that your child is in the neglect system does not mean necessarily that you are a poor parent. It may simply mean that the government has assumed responsibility for the care of your child because you cannot or because you require some assistance. In any case, the government's legal responsibility is to work toward reuniting you with your child. If reunification is not possible, the government must arrange for the permanent placement of your child.

Definitions

First, it is important to understand the meanings of the terms "abuse" and "neglect" as they are used in the legal system.

When a parent or guardian physically or emotionally injures a child it is defined as **child abuse**. The following are examples of how a child may be "abused:"

- abnormal or extreme physical punishment;
- emotional harm;
- sexual activity with a child; or
- not making "reasonable efforts" to keep the child from being harmed by others (for example, allowing a child to be in contact with drug-related activity — either using, selling, or distributing).

Child neglect occurs when a parent does not or cannot adequately care for a child. A child can be "neglected" because the parent does not have the resources to take care of the child, chooses not to take responsibility for the child, or is unable to take care of the child due to incarceration. Some examples of "neglect" situations are:

- not providing for the child's physical needs, such as food, clothing and shelter;
- not satisfying the child's emotional and/or educational needs (such as not sending the child to school);
- abandoning the child;
- refusing to be responsible for the care of the child; or
- being unable to care for the child due to incarceration.

Structure of the System

The abuse and neglect system involves social workers, judges, lawyers, the abused or neglected child, the parent(s) and foster parent(s). There are several ways a child may end up in the abuse and neglect system. Sometimes a mother who is incarcerated may place her child in the system because she is unable to find another way to care for the child. Or a woman may give birth while in prison and have no relative or friend to care for her child. These children may be considered "neglected," although the parent is not really "neglecting" their needs or care, but rather is unable to care for them because of her situation.

When a woman believes she is unable to care for her child/ren only for a short time, she may voluntarily place her child/ren in the neglect system. For example, if you suddenly lose your job and your home, you may turn your child over to the government for 90 days for temporary placement

in another person's home. This process is designed to give you, the parent, a chance to get yourself back on your feet. But since it can risk your future rights to custody, this process is not recommended unless you are absolutely sure that you will be able to take care of your child/ren at the end of the 90 day period. The child will not be returned to you unless you have found a job or have resolved the issues that made you seek DHS' help.

Sometimes other people observe indications of abuse that lead to the child's placement in the system. Anyone who believes a child is being abused or neglected can make a report to the police department or to DHS. Certain people, such as teachers, doctors and mental health professionals, are required by law to report suspected child abuse and neglect. A family member, friend or someone else in close contact with the child may also report the suspected abuse voluntarily.

Boarder Babies

Boarder babies are infants who are medically ready for release from the hospital but are without a parent or other authorized person to take them home. Often boarder babies are infants born to women who are incarcerated, homeless, or mentally ill. In these situations, the mother is often unable to care for the child and may have no other family who can assume responsibility for the child. Hospitals are required to report these babies to DHS, who then attempts to place them with relatives or in foster care. The babies may be classified as neglected and there will be a push to move quickly to either reunify them with their parents or to terminate parental rights.

If you give birth while incarcerated and have no one to designate as a caregiver, **it is very important for you to assert your visitation rights and express your interest in regaining custody of your child upon release**. This way the court will know that you expressed your desire to be reunited with your child. There should be social workers at D.C. General Hospital to work with boarder babies and their parents to facilitate placement of the babies and to provide the full range of social services required by each patient.

Preparing for Court

When a report of child abuse or neglect is made, the government gets involved. First the Corporation Counsel (the lawyers for D.C. government) will file a petition in the D.C. Superior Court. This petition describes the charges of neglect or abuse. When the case comes to court for the first hearing, the court decides where the child will live pending the outcome of the case. For incarcerated mothers the court has no choice but to place the child with a friend, relative, or in foster care.

Once a petition for a Child Neglect and Abuse case is filed against you, a date will be set for a court hearing and the court will appoint a lawyer for you, as well as for all of the other persons involved in the case. You will be served with copies of the papers filed with the court as well as a notice advising you of the hearing date. You will need to do the following to prepare for the hearing of the case:

- Find out who your appointed attorney is by contacting the office of Counsel for Child Abuse and Neglect (CCAN) at (202) 879–1301. If you provide them with your child's name and date of birth, CCAN will tell you the name of your attorney and his or her phone number.

- Find out the name and number of the social worker handling your case and the next court date involving your child. CCAN may be able to give you this information. If CCAN does not have the information about your social worker, you can call DHS at (202) 727–0995 to get the social worker's name and phone number.

- Contact your attorney to let him or her know that you want to be kept informed about your child and that you want him to do whatever is necessary to get that child back. Also request from your attorney copies of all reports filed with the court, and to be present for each hearing.

About three or four months later the case will go to trial. The court is primarily concerned with determining whether the child is actually abused or neglected and what should be done to protect the child from further abuse or neglect. You have a right to a trial and you cannot be coerced to admit either abuse or neglect. If you choose to admit that you were unable to care for the child or failed to meet the child's needs, you have entered into a "stipulation."

Your Rights and Responsibilities

The court may order you, or you may agree by stipulation, to comply with certain conditions in order for you to be reunited with your child. You, your attorney, the social worker and the judge all have some input in deciding what conditions are necessary and reasonable. Examples of conditions may be entering a drug treatment program, moving out of a violent living situation or getting a job.

The objective of the court and of the child welfare system should be to reunite you with your child once you have changed certain aspects of your life. For that reason, the demands they make on you need to be reasonable. The court-created conditions are negotiable and it is essential that you agree to terms that you will be able to accomplish. If you enter into a stipulation and are concerned that you will not be able to satisfy the conditions within the court's time frame, let the court know. Always read the stipulation and check the statement of facts before you agree to anything. If you admit to something such as sexual abuse, for example, you could face criminal charges. Thus, read the facts carefully, point out any inaccuracies and do not sign it unless you agree with it. If you agree to accomplish something by a certain date and you do not follow through, you risk losing your child.

The government also has certain responsibilities to you and the child. Make sure the court lists these responsibilities in addition to listing your duties. You should also know how the court plans to evaluate the performance of DHS in your case. Duties that DHS owes to you include arranging visitation with your children, enrolling you in job training programs, assisting you with drug treatment, and finding you housing.

Review

Once you sign the stipulation, the clock is ticking. After your child is placed in care outside of your home, the judge will hold a hearing at least every six months to review how the child is doing in the placement. The social worker is required to prepare a report for the court about the placement as well as the steps taken to reunite the family. In this report, the social worker will explain DHS' steps to assist you obtain such things as housing, financial assistance or employment. Obtain the social worker's report from your lawyer, and read it to ensure its accuracy. All of this information goes into a record that is kept until your case is closed. You want to make sure that incorrect information does not get into the file because the court can make decisions based on that information. The social worker will let the court know whether you have been in contact with the child and whether you have been involved in planning for the child's future. For this reason, it is important for you to actively work to reunite with your child. The social worker will also discuss with the judge any efforts you have made to correct any problems that may have contributed to the abuse or neglect such as addiction, lack of housing, or unemployment.

Motion to Terminate Parental Rights

If you do not make adequate progress after a certain amount of time, you may lose your parental rights. A **"Motion to Terminate Parental**

Rights" (TPR) may be filed against you. If the court grants the motion after a hearing, your parental rights and all contact with the child will be terminated. Termination of parental rights usually occurs before an adoption, and happens most often when a parent cannot be found. This can happen within a few months from the date of the stipulation. For example, a TPR can be made six months after you and the other parties have entered into a stipulation. This is especially likely when the case involves young children.

STRATEGIES FOR REUNIFICATION

Incarcerated mothers are in a very difficult situation when it comes to caring for their children. The following strategies may help you to be reunited with your child after you are released from prison:

- Maintain contact with your child through letters, cards, phone calls, and visits if at all possible. Keep copies or a record of all of these contacts. It will be easier to demonstrate that you made such efforts if you have a detailed account;
- Keep in close contact with the caregiver of the child or with the social worker, if your child is in foster care;
- Maintain contact with your court–appointed lawyer and let the judge know that you very much want to be reunited with your child when you are released;
- Ask your lawyer to arrange for you to be brought before the judge in person at any hearings concerning your child (this is called a "come–up" and you will not be transported to the court house without one);
- Take advantage of any parenting classes or counseling offered while you are incarcerated. Send a copy of your certificates to the social worker to let him or her know that you have completed these programs;
- Make sure that your lawyer says what you want him or her to say. Your lawyer is responsible for presenting your case the way you want it presented;
- Keep a record of any contacts you have with any private, public or government agency. If you try to call and cannot get through, make a note on your calendar, including the name of the person with whom you left a message. If you write a letter, make a copy for yourself;
- Similarly, if you run into problems with the caregiver of your child, keep a record of the problem, dates, and times. Note if the caregiver did not live up to his or her end of the deal but you followed through. For example, if you tried to see your children and could not or if the caregiver promised to bring the child to visit and failed to do so, write a letter to the caregiver explaining your disappointment. Send copies of the letter to both your social worker and the judge. Keep a copy of the letter for your records;
- Inform the social worker, your lawyer and the judge of any problems you encounter in meeting your obligation due to situations that are beyond your control. For example, if you cannot get affordable housing without having custody of your children, and you cannot get your children back without housing, the judge may be able to order the city to find housing for you.

ORGANIZATIONS TO CONTACT FOR ASSISTANCE

Counsel for Child Abuse and Neglect
DC Superior Court
500 Indiana Avenue, NW
Washington, DC 20001
(202) 879–1301
ATTN: Justine Dunlap or
Beverly Clendenon
[Provides information on the status of child abuse and neglect cases.]

DC Bar Legal Help Line
1250 H Street, NW
Sixth Floor
Washington, DC 20005-3908
(202) 626–3499
ATTN: Kala Shah
[Provides legal representation in custody cases.]

DC School of Law
Public Entitlements Clinic
719 Thirteenth Street, NW
Washington, DC 20005
(202) 727-5225
ATTN: Susan Waysdorf
[Provides assistance obtaining public benefits for children.]

Family Division
DC Superior Court
Domestic Relations Clerk
500 Indiana Avenue, NW
Room 4230
Washington, DC 20001
(202) 879-1421
ATTN: Ken Winston
[Provides assistance filing legal papers in court and provides information on the status of child custody cases.]

Juvenile Justice Clinic
Georgetown Family Poverty Division
600 New Jersey Avenue, NW
Room 312
Washington, DC 20001
(202) 662–9536
ATTN: Randi Mandelbaum
[Provides assistance obtaining public benefits for children.]

Neighborhood Legal Services
701 4th Street, NW
Washington, DC 20001
(202) 682–2700

Legal Aid Society
666 11th Street, NW
Room 300
Washington, DC 20001
(202) 628–1161
ATTN: Mary Bissell

Catholic University Law School
Columbus Community Legal Services
P.O. Box 4469
Washington, DC 20017
(202) 319–6788
ATTN: Ellen Scully or David Chavkin
[Provides legal services in custody and abuse and neglect cases, obtaining public benefits, and generally in small claims civil litigation.]

George Washington University
Community Legal Services
2000 G Street, NW
Suite 200
Washington, DC 20052
(202) 994–7463
ATTN: Joan Strand
[Provides legal representation and assistance to obtain social security benefits and other small claims litigation.]

Women and the Law Clinic
Washington College of Law
American University
4400 Massachusetts Avenue, NW
Washington, DC 20016
(202) 885–1500
ATTN: Diane Weinroth

DC Office of Paternity and Child Support Enforcement
613 G Street, NW
Washington, DC 20001
(202) 724-8800
[Provides assistance with establishing paternity and obtaining child support.]

BEST COPY AVAILABLE

XII. FILING FOR DIVORCE

INTRODUCTION

While you are incarcerated you may decide to file for a divorce. Although filing for a divorce while you are in prison is difficult because you do not have easy access to the courts and legal counsel, it is possible. To file for divorce on your own (pro se), you must follow the appropriate steps and have patience. DC operates under a "no–fault" system of divorce, meaning that you do not need grounds such as adultery, battery, or some other form of misconduct. You need only be separated from your spouse for a specified length of time (six months for a voluntary separation and one year for an involuntary separation). The actual process of filing for a divorce can take anywhere from a few months to over a year. The divorce process requires you to complete numerous documents, place many phone calls, and ask lots of questions. You may make some mistakes, have to repeat some steps, and not even succeed the first time around. However, if you are determined, you will eventually succeed.

A divorce terminates a marriage, and has several legal consequences. First, it is necessary if either party to a marriage wishes to remarry. Second, it prevents parties to a marriage from incurring debts in their spouse's name. Third, if you and your husband share any property, a court will determine your respective property rights. Finally, if you have children under the age of 21, filing for divorce means that a court order will be issued providing for custody of the children. This ensures that someone has both the authority and the responsibility to make decisions for the children regarding their health, education, and other needs. In addition, the Court may order child support. (It should be noted that child support can also be ordered in cases in which the parents are still married but separated, or were never married.)

This chapter describes the process for filing for a divorce pro se, which means without an attorney. However, it only discusses uncontested divorces—or those in which the divorcing parties agree to all terms of their divorce—because it is advisable to have legal representation in a contested divorce.

You may need to read through this chapter a few times before you are ready to begin your divorce proceedings. If you have children under the age of 21, you should read this chapter along with Chapter XI, "Child Custody Concerns for Incarcerated Women." You can also use the resources listed in this chapter if your husband files for divorce against you.

FORMS OF MARRIAGE

Although this is a chapter about divorce, it is important to outline the various forms of marriage available to DC residents. The type of marriage you have entered into determines the procedures you must follow in order to obtain a divorce. There are two types of marriage: ceremonial marriage and common law marriage.

Ceremonial Marriage

You have a ceremonial marriage when you have completed the necessary paperwork, appeared before an individual legally capable of marrying you, such as a minister, justice of the peace, or judge, and signed the marriage certificate. The marriage certificate is proof that you participated in a ceremonial marriage.

Common Law Marriage

In DC, you do not need to have a ceremonial marriage to be considered legally married. You can have a common law marriage if you have lived together in DC as husband and wife and intended to be married. This means that although you did not participate in a formal mar-

riage ceremony or sign a marriage license, you acted as if you were married and presented yourself to others as husband and wife. You can prove that you intended to have a common law marriage through evidence such as joint bills, tax returns, bank accounts, or any other documents in which you either used common names or indicated that you were married. DC does not require you to share a common last name or live together for any specific period of time before you are considered to have a common law marriage. You must be legally eligible to marry, which means that neither you nor your husband are already married to someone else or related to each other, and have lived together and sufficiently demonstrated your intentions to be husband and wife.

REQUIREMENTS FOR FILING FOR DIVORCE

In order to legally terminate either a ceremonial or common law marriage, you must file for a divorce. You are eligible for a divorce in DC if you meet three basic requirements:

- you are married (and can prove it);
- either you or your husband currently live in DC and have lived continuously in DC for at least six months immediately prior to filing for divorce; and
- you have met one of the two grounds available for filing for a divorce.

These three basic requirements are explained in detail in the following sections.

Proving that You are Married

In order to obtain a divorce, you must first prove to the court that you are married. Although this requirement may seem strange, the court does not automatically know you are married. There are two ways to prove your marriage. You either need a copy of your marriage certificate or evidence of a common law marriage.

Ceremonial Marriages

If you have a ceremonial marriage, you must provide the court with a copy of your marriage certificate. If you do not have your original marriage certificate, you can get what is called a "true" copy (which means that it is stamped with a raised seal) from the court where you were married. If you married in DC, you can get a true copy of your marriage certificate from the District of Columbia Marriage Bureau, D.C. Superior Court, 500 Indiana Avenue, NW, Room 4485, Washington, DC 20001. To have a true copy mailed to you, you must include a money order made payable to the "Clerk of Superior Court" in the amount of $10 with a letter requesting a true copy of your marriage certificate. You must tell the Court both your name and your husband's name and the year you were married. If you were not married in DC, you must contact the Marriage License Bureau or local court in the city where you were married.

Common Law Marriages

If you have a common law marriage, you must provide the court with evidence that you and your husband were married. As evidence, you can testify about your marriage, or have friends or neighbors testify on your behalf. You also can show the court documents that demonstrate your marriage, such as joint bills, accounts, and tax returns.

Residency

In order to meet the residency requirement, either you or your husband must now live in DC, and you must have lived continuously in DC for

at least six months immediately prior to filing for divorce. If your husband does not live in DC, you meet the residency requirement as long as you have lived in DC continuously for six months prior to your incarceration.

If you did not live in DC before you were incarcerated or had no steady address, you may meet the residency requirement if you have been incarcerated in DC's correctional facilities (including a halfway house) continuously for more than six months prior to filing for divorce. This includes residency at DC Jail, the Correctional Treatment Facility, or the Minimum Security Annex in Lorton, Virginia. If either you or your husband currently live in DC but have not lived here continuously for six months, you will have to wait until you have spent six months living continuously in DC before you file for divorce in DC.

If neither you nor your husband live in DC at the time of filing for a divorce, you cannot get a divorce in DC. This applies regardless of whether you were married in DC or used to live there. If you are transferred outside of DC to a facility that is run by another state or jurisdiction, you may be able to file for divorce in your new state of residence. Before you file for divorce in a state other than DC, you must check the requirements of that state because its divorce laws may differ from those of DC.

Grounds for Divorce

In order to file for divorce, you must state your grounds for divorce. ("Grounds" means a legally permissible reason for getting a divorce.) DC recognizes two grounds for divorce: involuntary and voluntary separation.

- Involuntary Separation

  Involuntary separation means that the decision to live apart was not mutual, and that either you or your husband wanted to stay together. If this is the case, in order to be eligible for a divorce, you must have lived separately (without "cohabitation") from your husband for at least one year prior to filing for the divorce. Living separately without cohabitation means that you have not had sexual relations with your husband for at least a year prior to filing for divorce.

- Voluntary Separation

  Voluntary separation means that you and your husband voluntarily agreed to separate. In order to qualify for a divorce as the result of a voluntary separation, you must have lived separately from your husband (without cohabitation) for more than six months prior to filing for the divorce.

Some couples find that although they want a divorce, they cannot afford to maintain two separate residences until the divorce is final. If a couple lives in the same home until their divorce, they can meet the required standard provided that they truly lived separately within the same home, which means they did not have sexual relations, did not have meals together, and did not socialize jointly.

BEFORE YOU FILE...

If you have met all of the requirements for divorce outlined above, then you are ready to begin the divorce proceedings. The procedure you must follow to file for divorce depends on whether your divorce is contested or uncontested. In an uncontested divorce, you and your husband agree to all terms of the divorce.

It is much easier and faster to get an uncontested divorce, because there are fewer issues to settle. You may never need to go to court if your hus-

band is willing to file the documents for you and appear in court. However, this requires that you and your husband agree on everything. Divorcing couples most often disagree about custody of the children, child support, and how to divide property. If your divorce is contested, then it will be much more difficult for you to file for divorce while you are incarcerated, and you will need legal representation.

The remainder of this section will help you determine whether your divorce is contested or uncontested by describing some of the issues that you and your husband must settle before you can file for an uncontested divorce. The following sections describe the procedure for filing for divorce.

Custody of Children and Child Support

If you have any children, you and your husband must decide who will have custody of them. Under DC law, a child is a person who is either born to you or adopted by you and your husband, is under eighteen years old, and is not yet married or self-supporting. Having custody of a child means that the custodial parent has both the right and the responsibility for the child's health, education, and welfare.

The non-custodial parent (the parent with whom the child does not live) also has rights and duties with respect to each child. This parent has the right to visit any children and assist in their upbringing. This parent also has the duty to pay child support to the parent who has custody of the children.

In DC, both parents have a legal duty to support their children until they reach 21 years of age. DC has child support guidelines that apply standard formulas to determine the required level of financial support. The guidelines take into account the incomes of both parents, the number of children, the age of the oldest child, and other factors. The standard payment is usually a percentage of the non-custodial parent's income and ranges anywhere from 20% to 40%. The minimum payment for a non-custodial parent with an annual income of less than $7,500 is at least $50 per month. If you and your husband do not make arrangements for child support or cannot agree on the amount of support, the Court will set the amount for you. Even if you informally agree on the amount of child support, the court must approve your agreement to ensure that the amount complies with established child support guidelines.

Property

Another issue which frequently causes disagreement is how to divide marital property. In DC, marital property is any property that you and your husband obtained while you were married. It does not matter if it is registered to only one of you, if only one of you purchased it, or if only one of you had a salary during your marriage. For instance, if you and your husband bought a house during your marriage and it is in his name, it is considered marital property and you are entitled to a share of it. Marital property may include any homes, retirement money, pensions, furniture, cars, and any other items that you acquired during your marriage. Marital property must be divided even if you and your husband have been living apart for years. When you decide to divorce, you must make arrangements for dividing the property or the Court will do it for you. If you and your husband have assets in the form of marital property (such as cars or homes), you may not be permitted to proceed with a pro se divorce, and the court may appoint you an attorney for your protection.

HOW TO HAVE YOUR FILING FEES WAIVED

Regardless of whether your divorce is uncontested or contested, you are required to pay a filing fee of $80 to the court when you file for divorce.

There may also be other court fees during the course of the divorce process. If you are unable to pay this fee, you must request that the Court waive them before you file all of your documents with the court. To have your fees waived, you must file an I.F.P. Application ("I.F.P." stands for In Forma Pauperis, which means "as a pauper" or poor person). In your I.F.P. Application, you must demonstrate that you are indigent (without any money). If you are able to pay your court fees, you should skip this section.

You can request a copy of an I.F.P. Application from the Family Division of the DC Superior Court (the address for the Superior Court is listed at the end of the chapter). When you receive the Application, you must complete and file the following documents at the same address:

- a Motion to Proceed with Waiver of Costs, which must be signed by you;
- a Sample of Points of Authority, which must be signed and notarized;
- an Affidavit in Support of an I.F.P. Application, which has to be signed and notarized (ask the Clerk for a sample I.F.P. Affidavit);
- a Pauper Affidavit and Order form, which must be signed and notarized. This is the form that the Judge signs after deciding if your I.F.P. Application is approved;
- a Financial Statement form; and
- a Certificate of Divorce, Dissolution of Marriage or Annulment form.

All of the papers you file with the court must be typed on 8-1/2" by 11" sheets of paper. Speak to your case manager about having the necessary documents notarized. Make sure that everything you put in your documents is accurate, or you may have to start all over. Make two copies of all your documents for your own records. Once you send the Court your I.F.P. Application, you will have to wait a few weeks for the Court to decide whether you can or cannot afford the $80 filing fee. The Court will send you a postcard telling you whether or not you can file your case without paying the fees. Do not lose this postcard—you will need it later. You must then file the remaining documents necessary to obtain your divorce. The following sections will explain how to file these documents. If the court does not waive the fee, you will still be able to file, but you will be required to pay the $80 filing fee.

FILING PROCEDURE FOR A CONTESTED DIVORCE

If you and your husband cannot agree about key issues such as child custody or the division of marital property, you will probably have to file for a contested divorce.

Even for individuals who are not incarcerated, contested divorces are difficult and require the expenditure of many more resources—both personal and legal. For example, while many people proceed pro se whether the divorce is contested or uncontested, standard advice is to seek legal assistance especially when the divorce is contested. This is because inadequate representation could result in extremely serious consequences including the loss of child custody, increased financial obligations, and the loss of personal and real property.

For incarcerated people, filing a contested divorce is even more difficult. First, as an incarcerated plaintiff in a contested divorce you are not entitled to be appointed an attorney free of charge. While there are several organizations who provide free legal assistance to indigent clients in divorce proceedings, most require you

to come to their office for an appointment. If you are unable to secure one of these attorneys you will have to pay the attorney. Second, either pro se or represented, you will have to file the divorce, serve the papers, and initiate the proceeding in court This means that you will have to appear in court. This is very difficult for incarcerated individuals, particularly those pursuing a divorce pro se.

The situation is somewhat different for incarcerated defendants in a contested divorce proceeding. The court will appoint you an attorney if you are incarcerated and named as a defendant in a contested divorce proceeding. Even this situation presents problems due to the difficulties in gaining access to phones while incarcerated and in arranging to appear in court.

In short, it is very risky to pursue a contested divorce pro se while in prison. We advise you to obtain legal assistance either through private counsel or through the organizations listed at the end of the chapter. If you have an attorney, either as a defendant or a plaintiff in a contested divorce, recognize the barriers that your incarceration presents.

FILING PROCEDURE FOR AN UNCONTESTED DIVORCE

If you and your husband agree to all of the issues related to your divorce such as child custody, child support, and the distribution of debts and personal or real property, then you can file for an uncontested divorce. In an uncontested divorce, only the plaintiff must appear at the divorce hearing. Because you are incarcerated, you will not be able to appear at the hearing, unless you are released prior to the hearing date or the judge issues a "come up" ordering you to be brought up for the hearing. Therefore, if your husband is not incarcerated and he is willing to help you, he should be named as the plaintiff to the suit, and you should be the defendant (the person being sued). As the plaintiff, he may be required to file the papers with the court and he must appear at the divorce hearing. However, if both of you are incarcerated, or if your husband lives in another state, then you may have to be the plaintiff. This makes the process much more difficult.

After you have obtained a copy of your marriage certificate, you must obtain the six forms necessary to file for an uncontested divorce and prepare them (which includes typing them and having them notarized). Then you must either mail the papers to your husband or have him pick them up, have him sign them and have them notarized, and file them in court. These steps are explained in detail below. Remember that these instructions only apply if you and your husband agree to the terms of the divorce.

Obtaining the Forms

You will need to request copies of all necessary forms from the court. Write a letter to the court requesting a packet for an uncontested divorce. Indicate whether you separated involuntarily or voluntarily, whether you have been separated for six months or one year and whether you have children or any marital property to divide. Also request a "Vital Statistics Form." Mail your request to the Family Division of the D.C. Superior Court.

Completing the Forms

Once the packet of forms is sent to you, you will have to complete them according to the instructions provided. The court requires the forms to be typed on 8–1/2" x 11" paper. Speak to your case manager about having the necessary documents notarized. Make sure that everything you put in your documents is accurate, or else you may have to start all over. Prepare the following documents for filing:

- a notarized Complaint signed by the person who requests the divorce (the plaintiff). The complaint is a document in which you state the basis for your divorce suit and include all pertinent information regarding the suit;

- a notarized Answer signed by the defendant. If all of the forms listed here are properly completed and filed, the defendant does not have to appear at the court hearing. The answer contains the defendant's response to the complaint, and indicates whether or not the defendant agrees to the divorce.

- a Certificate of Divorce, Dissolution of Marriage or Annulment form;

- a notarized Uncontested Praecipe signed by both of you stating that you both agree to all terms of the divorce;

- a notarized Waiver of Service signed by the defendant (the same person who signed the Answer) so that the plaintiff does not have to serve the papers;

- a Findings of Fact and Order of Divorce that the judge will sign on the hearing date;

- a "true" copy of your marriage certificate; and

- a money order for $80. If you cannot afford the $80 you must file an I.F.P. Application along with your divorce papers. If you filed the I.F.P. Application in advance, then you should include the postcard which indicates that your application to waive the fees was granted.

Make two copies of each of the documents listed above. Keep one set and give the other to your husband. Make sure he signs the documents and has his signature notarized (when appropriate).

Filing the Forms

If your husband is the plaintiff, he can file all of the documents listed above at the Family Division (Room 4230) of the D.C. Superior Court. He should bring an extra copy of the completed documents to be stamped by the court with the date. That way, you have some proof of filing in case the court loses your documents. Keep a copy of the money order or the I.F.P. postcard granting your fee waiver. If your husband pays in cash he should make sure that he gets a receipt from the clerk at the courthouse as proof of payment. If you are the plaintiff, then you should file the papers through the mail. Be sure that all of your paperwork is completed as indicated.

Upon filing the documents, the plaintiff will be assigned a hearing date, and will be mailed information indicating when and where the hearing will be held.

The Hearing

As previously mentioned, only the plaintiff has to appear at the hearing for an uncontested divorce when all of the forms have been completed and filed properly. You cannot attend the hearing if you are incarcerated, unless you are released prior to the date of the hearing or the judge issues an order to have you brought up for the hearing. The judge or hearing commissioner will ask the plaintiff to answer some questions under oath.

At the divorce hearing the commissioner will read aloud the divorce order. After the divorce hearing, the clerk dockets the judgment. The divorce does not become final until sixty days after the judgment has been docketed. (Sixty days is the maximum time period for appealing the judgment.) Once the judgment is docketed, a copy of the final order is sent to you through the mail. If more than two months pass after the hearing date and you have not received a copy of

your divorce judgment, you should call the court and request that another copy be sent to you. Because the divorce is not final until sixty days after the divorce is docketed by the clerk of the court, neither you nor your husband can remarry until these sixty days have passed.

RESOLVING DISPUTES THROUGH FAMILY MEDIATION

Individuals who qualify for a divorce in the District of Columbia have the opportunity to resolve issues that must be addressed in their divorce agreement free of charge through mediation.

Family mediation is offered free of charge through the Family Mediation Program of the Multi–Door Dispute Resolution Division located in the DC Superior Court building. Through the Family Mediation Program, mediators can assist you and your spouse in resolving issues such as child custody, child support, visitation, spousal support, property and debts. The mediators will provide you with a written document outlining all of the decisions you and your spouse make on any of these issues. This document can then be taken to Court for approval by the Judge.

Participation in the Family Mediation Program is not limited to married persons. The program will assist any individual who has a dispute before the Family Division of the Court, or qualifies to have a family dispute addressed by the Court. Exceptions include adoption cases and paternity and support cases involving AFDC recipients filed by DC, unless a parent requests visitation, in which case that issue alone can be resolved in mediation.

In order for mediation to be successful and fair, it is very important that one party does not feel threatened or dominated by the other. As a rule, the Family Mediation Program will not mediate cases where: one party has seriously injured the other party; one party has threatened to use or has used a weapon against the other; there is a history of repeated violence between the parties; there is evidence of child abuse; or there is a severe lack of equality in the bargaining power between the parties.

Mediation offered by the Family Mediation Program is conducted by two neutral persons who help you and your spouse to reach an agreement that is acceptable to both of you. The mediators' role is not to provide you with legal representation or to make a decision about your dispute. Their role is to facilitate communication between you and your spouse, help clarify areas where you agree and disagree, and assist both of you in generating ideas for resolving your disagreements in a manner that will work for both of you.

Resolving issues surrounding your divorce or other family–related matters through mediation has the following advantages:

- You control your future. When couples cannot reach an agreement on their own and must go to court, decisions about the most basic aspects of their lives are placed in the hands of a complete stranger — a DC Superior Court Judge. You have no way to know whether the Judge will rule for you or against you. The final mediated agreement may not contain everything you want, but a Judge's decision may provide you with little or nothing that you want.

- The process is confidential. As a result, very personal matters which have been raised in the mediation session (for example, past drug use or your criminal record) do not have to be discussed in a public courtroom and do not become part of the Court's public record. Family Mediation Program mediators are not permitted to discuss any

aspects of their sessions with you and your spouse with the Judge.

- This service is offered free of charge. If you and your spouse reach an agreement, you will both save the expense of litigation which can be very costly. It is important to mention that the Family Mediation Program will urge you and your spouse to each obtain an attorney to review the final mediated agreement to ensure that your individual interests are protected.

You can obtain more information about the Family Mediation Program of the Multi-Door Dispute Resolution Division or schedule an appointment with a case manager by calling (202) 879-1549.

CONCLUSION

Filing for a divorce while you are incarcerated will probably not be easy. However, if you stick with it and do not get discouraged, you will eventually succeed. Above all, you need to be patient, and willing to try again when you make mistakes. You may even find that the court will not allow you to proceed on your own and will instead appoint an attorney to represent you. If you choose to file without legal assistance, hang in there, do not give up, and follow the directions provided in this chapter and on the forms you receive from the courthouse.

ADDRESSES

DC Bar Legal Help Line
1250 H Street, NW
Sixth Floor
Washington, DC 20005-3908
(202) 626-3499

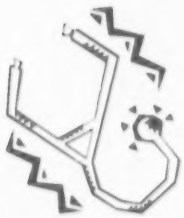
Family Division
DC Superior Court
Domestic Relations Clerk
500 Indiana Ave., NW
Room 4230
Washington, DC 20001
Attn: Ken Winston
(202) 879-1421
[Information on filing and status of divorce pleadings]

Marriage Bureau
DC Superior Court
500 Indiana Ave., NW
Room 4485
Washington, DC 20001
(202) 879-4850
[Obtain marriage certificate]

Catholic University Law School
Columbus Community Legal Services
P.O. Box 4469
Washington, DC 20017
(202) 319-6788
ATTN: Ellen Scully or David Chavkin

DC Office of Paternity and Child Support Enforcement
613 G Street, NW
Washington, DC 20001
(202) 724-8800
[Provides assistance determining paternity and obtaining child support. $5 application fee; free to AFDC recipients.]

Fam'l
319-6788
Anne Leuth
Catherine Klein
Margaret Barry



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XIII. GENERAL MEDICAL CARE

INTRODUCTION

At some point during your incarceration you are likely to require medical care. Many women enter prison with medical conditions requiring treatment. Often, these health problems were caused or aggravated by stress, poor nutrition, homelessness, and/or alcohol and other drug use. Many women in the criminal justice system experienced difficulty obtaining medical care while they were in the community, due to the lack of health care services available to low-income people. For many women, prison provides them with their first opportunity to interact with health care providers on a regular basis.

Taking care of your health is one of the most important things you can do. This chapter discusses many of the general health care concerns of incarcerated women, and explains how to obtain medical care both in prison and in the community. Because women's reproductive health is so important to their overall well-being, entire chapters of this *Resource Guide* are devoted to breast and cervical cancer, AIDS and other sexually transmitted diseases, and pregnancy (Chapters XIV–XVI).

HEALTH CONCERNS OF INCARCERATED WOMEN

All women share common health concerns during their lifetime. These concerns often change as women pass through different stages of their lives. Women prisoners, however, are more likely to experience chronic health problems, due to their poverty and high risk behaviors such as drug use, and the lack of prevention and treatment services available to them. These problems include, but are not limited to:

- seizure disorders such as epilepsy
- disorders related to poor nutrition and/or stress, such as diabetes, obesity, and high blood pressure
- asthma
- contagious diseases such as tuberculosis and hepatitis
- HIV/AIDS and other sexually transmitted diseases
- gynecological problems such as infections, fibroids, and cancers
- pregnancy complications
- drug and alcohol addiction
- injuries and/or mental health problems caused by violence in women's lives

If you have any of these health problems or any others, it is very important to seek appropriate treatment.

MAINTAINING YOUR HEALTH

Sometimes it is not easy for women to maintain their health while incarcerated. The stress of incarceration, along with the poor diet and lack of exercise can wear down your immune system and make you much more susceptible to illness. In addition, airborne communicable diseases, such as colds, the flu, and tuberculosis, tend to spread easily through the prison population, due to crowded living conditions and poor ventilation.

Despite these difficulties, there are some simple steps you can take to lead a healthier lifestyle. Do your best to eat a healthy diet. In order to get the nutrients you need, eat a balanced diet of the four basic food groups: (1) meat or a meat alternative such as beans; (2) milk or dairy products; (3) fruits and vegetables; and (4) cereals and grains. If the prison diet does not allow you to eat a balanced diet, try to supplement your diet with nutritious food from the canteen or from home. You may also want to take vitamin supplements, if they are available at your facility. In addition to a proper diet, you should take advantage of opportunities to exercise, get enough sleep and avoid stressful situations. By refraining from smoking, you can greatly reduce your chances of developing lung disease.

including lung cancer. Of course, abstaining from alcohol or drug use is a *significant* step towards reducing your health risks. In addition, using a condom during sex will protect you from HIV and other sexually transmitted diseases. These are all important steps that you can take to lead a healthier lifestyle.

One of the most effective ways to ensure your health is to seek routine preventive care. Such care is designed to prevent illness, to detect and treat illnesses at an early stage and to prevent them from progressing into more serious conditions. For women, routine preventive care involves regular physicals and gynecological exams, including timely Pap smears and breast exams. It is vitally important that all women take responsibility for seeking their own preventive care. No one else will remind you to do so. This involves keeping track of when you need your annual physical and Pap smear, and monthly breast exam (see Chapter XIV for more information). If you are in prison or use public clinics in the community such as D.C. General Hospital, you may need to schedule your check–up a few months in advance. This ensures that any medical problems which may arise are detected promptly and at an early stage, when they are easiest to treat.

SEEKING TREATMENT

It is very important to seek treatment as soon as you experience symptoms of illness, such as pain, lumps, persistent coughing, or changes in your bodily functions. Do not wait until your symptoms get worse. Health problems are much easier to treat, and your chances of a complete recovery are much better, if you seek treatment before you allow your condition to deteriorate. Seeking treatment earlier will not only make you feel better physically, but it will enable you to avoid the stress and anxiety that women experience when they are concerned about their health.
When you seek treatment for a medical problem either in the community or in prison, be sure to ask the doctor or nurse all of the questions you may have. Sometimes we do not ask questions regarding our health because we do not feel comfortable talking about our bodies or our sexual behaviors (for example), or because we are embarrassed that we do not better understand our bodies. We may also feel intimidated by doctors. However, people can only make informed decisions regarding their health care if they have full access to information. Ask your doctor about your condition, your course of treatment, and your prognosis. Find out if there are things you can do on your own, such as changing your diet, to improve your condition. Learn all you can about your condition to ensure the best possible outcome.

If you do not feel comfortable with a recommended treatment, ask if other options are available. You also have the right to refuse treatment, *even if you are incarcerated.*

The following sections describe the prison health care system, and provide information on health care services in the community.

Medical Care in Prison

The DCDC is responsible for providing appropriate medical care for prisoners under their jurisdiction. This means that the Department of Corrections is required to provide prisoners with the same standard of care that is required in the community. Each facility has its own medical unit where prisoners go when they report to sick call. However, the facilities differ in their capabilities to address more severe or complex health problems. The Correctional Treatment Facility ("CTF") is the only facility with its own infirmary, along with a special OB/Gyn clinic for pregnant women. This means that if you are at one of the other facilities and your illness requires you to remain in the infirmary, you will be transferred to CTF until you are healthy

enough to return to the general prison population. However, if you require an appointment with a specialist or require care that the prison is not capable of providing, you will be sent to D.C. General Hospital. For example, you must go to D.C. General Hospital if you are pregnant and require a sonogram, or if you need surgery or require specialized tests. Prisoners are shackled during transportation to the hospital, and while they await treatment. Women who are in labor, however, should not have their hands and feet shackled (see *Women Prisoners v. District of Columbia*, No. 93-2052, slip op. (D.D.C. Dec. 13, 1994)). If a medical condition requires hospitalization, prisoners are housed either in a locked ward specifically for prisoners, or in a room under guard at all times.

D.C. General Hospital also provides all medical treatment to prisoners who are confined to halfway houses. You must follow a specific procedure to get care while you are at the halfway house. See Chapter X, "Halfway Houses", for more information.

Intake Physicals

Prisoners should receive a complete physical within 24 hours of arriving at the Central Detention Facility ("Jail"). This physical should include the following:

- urinalysis (including a pregnancy test)
- test for sexually transmitted diseases
- tuberculosis skin test and chest x-ray
- culture of abnormal discharge
- breast and pelvic exam (including a pap smear)
- HIV test (only if HIV is suspected; this is voluntary and **cannot** be administered without your consent)
- dental screening

If your intake physical reveals any injuries or medical conditions, appropriate tests or x-rays will also be conducted. If you take prescription medication, you will need to go through sick call to obtain a new prescription from the prison pharmacy.

The intake physical not only enables the prison staff to identify any physical or mental health conditions requiring treatment, but also helps determine housing assignments. For example, pregnant prisoners are sent to the pregnancy unit at CTF. Prisoners with mental health problems may be referred to the psychiatric clinic at D.C. General Hospital or to the psychiatric unit at the Jail. Prisoners with serious but not life-threatening conditions will be sent to D.C. General Hospital or the infirmary at CTF.

The medical facility often neglects to tell prisoners their test results from their intake physicals. If you are interested in obtaining the results, you will need to request them from the medical unit on your own.

Sick Call

Prisoners requiring non-emergency medical care must sign up for sick call. The sick call procedures differ at the various facilities. At the Annex, sign up sheets are posted in each dormitory. At the Jail and CTF, sign-up sheets for sick call are on the housing units. Unfortunately, if you are too sick to sign up for sick call, you will not receive care. If this is the case, try to have a friend sign up for you or alert a Corrections Officer to your situation.

Some women report that sick call has been inconsistent, especially at CTF. This has been due, in part, to recent contract disputes between the Department of Corrections and the physicians and Physician Assistants ("PAs"). If you sign up for sick call and no one responds, continue to sign up every day until someone does. *Do not give up.* You can also file an inmate grievance form (IGP)

to complain about sick call (see Chapter V, "Dispute Resolution"). If you continue to have a problem with sick call, or if your condition is such that you do not have time or energy to file an IGP or to resolve the problem on your own, contact one of the prisoners' rights organizations listed at the end of this chapter.

Obtaining Medication

Medicine is administered to prisoners through sick call. This includes not only prescription medication, but over-the-counter medications such as aspirin or cold remedies. Prisoners are allowed to keep their own medication only in very limited circumstances. For example, pregnant prisoners can keep prenatal vitamins with them in their cell. If you are at the Annex and you take medication on a regular basis, you must go to the medical trailer each time you take your medicine. If you are at the Jail or CTF, it will be brought to you by the medical staff.

When prisoners receive a prescription from D.C. General Hospital, the prison medical staff must transfer it to their own prescription pad and send it to the prison pharmacy. Sometimes, the medication prescribed by doctors at D.C. General Hospital is not in stock at the prison pharmacy. As a result, the prison pharmacists may substitute it with a different, and potentially inappropriate, medication. If you know the medication you receive is different from that which was prescribed to you, always ask the prison medical staff if it is appropriate for you to take it. If a doctor at D.C. General Hospital prescribes medication for you, you may also want to ask the doctor which medications can be substituted in its place.

Whenever you receive a new medication, ask questions about it. Find out its name, whether you should take it with food or on an empty stomach, how often you should take it, and if there are any potential side effects. Try to figure out which medications work, and which do not, and discuss this with your doctor. Generally, however, it is not advisable to stop taking the medication without a doctor's approval.

If you take prescription medication on a regular basis, try to anticipate when your prescription will run out, and report to sick call to get it refilled *before* this occurs. Do not wait until after it runs out to get your prescription refilled. It may take time for the prison to restock your medication, especially if it is not commonly administered at the facility. Keep in mind that the prison pharmacies may not be staffed during the weekend. You may have to wait to get your medication, especially over the weekend.

Injuries and Emergencies

You should immediately report any injuries to the Corrections Officer ("C.O.") on duty, or to your supervisor if you are at work. Once you have reported an injury to a C.O. or supervisor, it is their responsibility to ensure that you receive medical care. If the C.O. does not think that your injury is serious enough to require medical attention, you can still insist on seeing a doctor, or wait until another C.O. is on duty. If a C.O. discourages you from getting medical attention or does not make sure that you receive medical attention promptly, he or she can be held accountable to the Department of Corrections. You should also always insist that the C.O. complete an injury report for you.

If you are on the unit and have a medical emergency, such as an asthma attack, tell the C.O. on duty to place an emergency call to the medical unit. The medical staff should bring a stretcher to transport you to the medical facility or to an ambulance to take you to D.C. General Hospital, if necessary.

Surgery

The DCDC is required to provide all surgery which is absolutely necessary for preserving the health of prisoners. This includes all surgery necessary to correct life-threatening conditions, or conditions that severely threaten organ or other bodily functions. Elective surgery, or surgery that is not absolutely necessary, is generally not provided by the DCDC. The DCDC will only cover the cost of elective surgery if it is absolutely necessary to prevent unnecessary pain. Generally, it is very difficult to get the Department of Corrections to schedule surgery for prisoners. If you need surgery, you will need to push for it. If you do not, your condition may deteriorate and you may experience increased pain. This may not only adversely affect your health, but your ability to participate in programs necessary for your release.

Surgery is generally performed at D.C. General Hospital. The Jail, however, has a small surgery clinic once a week. It is staffed by surgery interns and residents from Howard University Medical School. They do not perform any surgery at the Jail, but are available for consultation. You may be referred to the Jail's surgery unit before you are sent to D.C. General Hospital, depending on your condition.

Dental Care

Prisoners frequently experience dental problems because they did not have access to or take advantage of dental care in the community. Generally, people should see a dentist once a year for a check-up. While prisoners are entitled to adequate dental care, the DCDC is only obliged to provide them with a level of care necessary to prevent pain and to permit eating. Most facilities have a separate sign-up sheet for dental care. Generally, the prison will only provide you with a filling or pull a tooth; they do not provide caps or perform root canals. Dental surgery is performed at D.C. General Hospital. Unfortunately, there is generally a very long wait for replacement teeth or dentures. If you need dentures, you must be both patient and persistent.

Testing and Treatment for Tuberculosis

Tuberculosis, or "TB," is an important concern for anyone living in an institutional setting, including prisons and homeless shelters. Prisons, in particular, are a major source of TB infection because of the crowded and unsanitary conditions, poor ventilation, and the large number of people who have weakened immune systems. Because TB is an airborne communicable disease which spreads easily, it should be a particular concern for individuals who have HIV or AIDS. The *vast majority* of people who are infected with TB do not actually develop active TB disease. However, people with weak immune systems — such as people with HIV or diabetes — who contract TB are more likely to develop the active form of the disease. While active TB can be fatal if left untreated, it is generally easily treated through medication.

The first signs of TB disease are a persistent and productive cough, fever, and weakness. It can spread to others when a person with active TB disease coughs and germs enter the air. You cannot contract TB from someone who has only been exposed TB. You can only contract it from someone with active TB disease.

All prisoners should receive a TB skin test and chest x-ray during their intake physical at the Jail. Additionally, prisoners who think they may be pregnant should receive a pregnancy test prior to their chest x-ray to determine if they are pregnant, because x-rays can be harmful to a developing fetus. Anyone who receives an x-ray should be covered with a protective lead shield during their x-ray. This is especially important if you are pregnant. Experts recommend that all prison-

ers receive a TB test once every year after intake. If you want an annual TB test, you will have to sign up with sick call and request it yourself. You should also request a test for TB if you have been exposed to someone with active TB, or if you have a productive cough that lasts more than two weeks.

To be tested for TB, report to sick call and request a test. A medical personnel will inject some TB serum under your skin and will check it 2–3 days later to determine whether your skin reacts to it. If you develop a bump at the injection site, you may have been exposed to TB. *It does not mean you have active TB.* The staff will perform a chest x–ray and other tests to determine whether you have the active form of the disease. People with HIV–disease should receive chest x–rays on a regular basis to determine if they have TB. This is especially important, because sometimes people with HIV have such weak immune systems that they do not react to the skin test even though they have TB.

If your skin test reveals that you have been exposed to TB, you may need to take medication called INH regularly for 6 to 8 months to ensure that you do not develop active TB. You should also request to take vitamin B6. It is recommended that HIV–infected individuals who test positive for TB take their medication for a full year or more. INH is not recommended for people over 35 years old, or for people who have liver disease (unless they are HIV–positive). Regardless of the type of medication you receive, *it is very important that you take your medicine regularly until it is finished.* If you do not, you are more likely to develop active TB disease, or a form of TB that does not react to medication. While you are taking INH, it is very important to refrain from using alcohol or other drugs, or you may experience liver damage. You should note that if you have tested positive for TB once, you will always test positive in the future.

If your chest x–ray reveals that you have active TB disease, you will be sent to D.C. General Hospital and placed in an isolated room to ensure that the disease does not spread to others. Although you may have to remain hospitalized for a while, TB disease is treatable. You may return to the general prison population when you have recuperated and are no longer contagious.

Special Diets

Some inmates require special diets due to medical conditions. For example, people with high blood pressure (hypertension) require diets that are low in salt and cholesterol. Diabetics should not eat foods that contain sugar. Women with anemia require diets that are high in iron. Pregnant women also have increased nutritional requirements. These are only a few examples of medical conditions which require special diets.

Only a physician or a dentist can arrange special diets for medical purposes. (For information on special diets for religious reasons, see Chapter III, "Religious Practice".) To order a special diet, the doctor must submit a Special Medical Diet Order Form. The special diet will contain the same meals provided to the general population, with whatever changes the doctor prescribes (for example, without salt). Occasionally, some foods may be added or deleted depending on your particular needs. If you have any concerns regarding the amount or type of food you receive, consult the medical staff.

Medical Records

The prison maintains medical records containing the medical status and treatment history of each prisoner. All of your medical records are confidential and only medical personnel may read them. In addition, your doctor cannot discuss your medical condition or treatment with anyone without your permission. If any medical infor-

mation is released to an unauthorized individual, you should file an IGP form to the Warden of your facility immediately. If the IGP process does not resolve your complaint, you should contact one of the prisoner advocacy groups listed at the end of this chapter.

You have a right to read your entire medical record, except for psychiatric care records. A member of the health services staff will be present while you view your records. In order to obtain them, you must contact the Freedom of Information Officer, Department of Corrections, Sixth Floor, 441 4th Street, NW, Washington, DC 20001, (202) 727-6295. Specify that you are requesting a copy of your medical records under the Freedom of Information Act (D.C. Code Section 1-1.521 et seq.) If you wish to have your attorney or an outside physician view your records, you will need to sign a form authorizing the DCDC to release your medical records to the person you designate.

Compassionate Release

On May 15, 1995, the Medical and Geriatric Parole Act became law. This statute allows prisoners with certain severe medical conditions to be released prior to their parole eligibility date. The law applies to prisoners who are: (a) permanently incapacitated; (b) terminally ill and within six months of death; or (c) over 65 and disabled by conditions related to age. Persons who are serving the mandatory minimum portion of their sentence, or who suffered from the condition at the time of sentencing, cannot be paroled under this law.

For more information on compassionate release, see Chapter IX, "Surviving the Parole Process".

Resolving Complaints about Medical Care

It is not uncommon for prisoners to encounter barriers to medical care while they are in prison. Prison overcrowding and medical staff shortages may make it difficult for prisoners to obtain care in a timely manner. In addition, prison resources are generally directed toward security, rather than toward providing medical care for prisoners. For example, prisoners have missed appointments at D.C. General Hospital because the prison did not have transportation available, or because their medical records were not sent to the hospital. Prisoners also become frustrated by the long waits at D.C. General Hospital, during which time they must remain shackled. Sometimes it takes a long time for prisoners to get their test results. If you experience these or other problems with the prison medical care system, *do not let it deter you from seeking appropriate care*. You may need to be very patient. There are some steps you can take to resolve these problems on your own and obtain care.

If you experience difficulties obtaining medical care, you should begin by bringing it to the attention of the medical staff. Although you may be very frustrated by the situation, it is important to remain polite and courteous, but firm. Yelling or screaming at the medical staff will only make your situation worse. If your efforts to get help through the medical staff are unsuccessful, submit an I.G.P. to the administrator of your facility or to Health Services. Sometimes, you will have to be persistent to make sure you get the treatment you need. If these efforts do not work, you should contact one of the prisoner advocacy organizations listed at the end of the chapter.

If the Department of Corrections ignores severe medical needs, or if it provides grossly substandard care, you may have a cause of action against the Department of Corrections. Prisoners have a constitutional right to adequate and timely medical care. The Eighth Amendment's prohibition against cruel and unusual punishment requires that prison medical facilities satisfy certain standards and that doc-

tors treat prisoners with the same level of care as private patients. However, a constitutional violation only exists if the prison demonstrates "deliberate indifference" to a prisoner's serious medical needs — a *very difficult* standard to prove. Alternatively, you may have a cause of action if the doctor was negligent, or if a procedure was performed without your consent. Generally, these lawsuits require specific proof that you were severely injured or permanently impaired by the alleged conduct, or that the conduct was outrageous. It is not enough to say that you were not treated appropriately. If you believe, however, that you have a cause of action against the Department of Corrections, you should contact a lawyer. You generally will need to find one who is willing to take your case on a pro bono or contingency fee basis. You may also contact one of the organizations listed at the end of this chapter. Generally, these organizations do not file lawsuits on behalf of individuals. Some of them have, however, filed class action lawsuits challenging the quality of medical care provided by the Department of Corrections, and your information may be useful to them.

Medical Care in the Community

Two of the largest concerns of women seeking health care in the community is knowing where to go for appropriate care, and being able to afford it. Because of these obstacles, many women do not seek care until their condition becomes an emergency, or they show up at the emergency room because they do not know where else to go for treatment. However, this is not a good strategy. First, you need to treat medical conditions as soon as you begin experiencing symptoms in order to ensure a better outcome. Do not let your condition deteriorate until it becomes an emergency! Second, if you show up at the emergency room, you are likely to experience a long wait — perhaps several hours. Third, emergency room care is much more expensive.

There are a number of clinics, hospitals, and programs in DC which provide care to low-income people. The chart at the end of this chapter includes information on where to go for general medical and dental care, mental health services, and eye care. Clinics providing Pap smears and breast exams, AIDS and other STD-related services, and prenatal care are listed in Chapters XIV–XVI. Always call in advance to find out their hours of operation, and ask whether you need to make an appointment. Due to the high demand for some of these services, you may have to wait weeks to months for an appointment. This is also true for D.C. General Hospital. This means you should think ahead, and schedule routine appointments several months in advance, if possible.

DC also has several public assistance programs designed to make health care more affordable to low-income people. These include Medical Assistance, Medicaid, and the DC Medical Charities program. Unfortunately, their availability may change due to budget cuts. These programs are described in detail in Chapter XVIII, "Public Assistance".

In the community, as in prison, it is not always easy to obtain appropriate care. In addition to long waits both for scheduling appointments and at the clinics themselves, it is sometimes difficult to obtain important information about test results or a medical condition, or to obtain services for people receiving public assistance or who are indigent. If you are having problems obtaining treatment in the community, do not let it deter you from seeking the care that you need. Although the situation may be very frustrating, remember to remain polite and courteous in your interactions with people. Do not yell or scream at anyone. Most of all, hang in there. Remember that with respect to your health, you are your own best advocate. If you are persistent and patient, you should get the care that you need.

RESOURCES

If you are incarcerated and you are not getting the medical care that you need, contact one of the following organizations:

National Women's Law Center
Women in Prison Project
11 Dupont Circle, NW
Suite 800
Washington, DC 20036
(202) 588-5180

D.C. Prisoners' Legal Services Project
1400 20th Street, NW
Suite 117
Washington, DC 20036
(202) 775-0323

Prisoners' Rights Program
Public Defender Service
P.O. Box 47
Lorton, Virginia 22079
(703) 643-1034
(202) 628-1200

The following organization provides health care to homeless people:

Health Care for the Homeless
Central Intake
2458 MLK Ave., SE
Washington, DC 20020
(202) 610-3880
Hours: Mon.-Fri., 8:30-11:30 am.
Health Care for the Homeless also has a number of other clinics located in homeless shelters throughout the city.

The following chart lists medical care resources in the District of Columbia. The District, however, plans to close several of these clinics due to budget cutbacks. If you plan to visit any of these clinics, call in advance to make sure they are still open.

MEDICAL CARE

Organization Name	Address & Telephone Number	Services Provided
Adams Morgan Clinic	2250 Champlain St., NW Washington, DC (202) 673–7702	❑ Dental Care ❑ Bilingual Services ❑ General Medical Care
Anacostia Health Center	1328 W St., SE Washington, DC (202) 767–7880	❑ Dental Care ❑ General Medical Care
Andromeda Hispano Mental Health Center	1400 Decatur St., NW Washington, DC (202) 291–4707	❑ Bilingual Services ❑ Mental Health Care ❑ General Medical Care
Area B Community Mental Health	1125 Spring Rd., NW Washington, DC (202) 576–7169	❑ Mental Health Care
Area C Community Mental Health	1905 E St., SE Washington, DC (202) 727–9040	❑ Mental Health Care
Benning Heights Clinic	46th and Benning Rd., SE Washington, DC (202) 767–7566	❑ Dental Care ❑ General Medical Care
Center Number 17	702 15th St., NE Washington, DC (202) 727–0395	❑ Dental Care
Centro Catolico Hispano	3055 Mount Pleasant St., NW Washington, DC (202) 332–6664	❑ Dental Care ❑ Bilingual Services ❑ General Medical Care
Christ House	1717 Columbia Rd., NW Washington, DC (202) 328–1100	❑ General Medical Care
Clinica del Pueblo	1470 Irving St., NW Washington, DC (202) 462–4788	❑ Bilingual Services ❑ General Medical Care ❑ Mental Health Care
Columbia Road Health Services	1660 Columbia Rd., NW Washington, DC (202) 328–3717	❑ Eye Care ❑ Bilingual Services ❑ General Medical Care

MEDICAL CARE

Organization Name	Address & Telephone Number	Services Provided
Community Crisis Center	4509 Auburn Ave. Bethesda, MD (301) 656-9420	❑ Mental Health Care
Community of Hope	1417 Belmont St., NW Washington, DC (202) 232-9091	❑ Bilingual Services ❑ General Medical Care ❑ Mental Health Care
Community Medical Care	1118 9th St., NW Washington, DC (202) 408-9835	❑ General Medical Care
Community Medical Care	1426 9th St., NW Washington, DC (202) 387-0300	❑ General Medical Care
Congress Heights Health Center	3855 8th St., SE Washington, DC (202) 645-4153	❑ Dental Care ❑ General Medical Care
Crisis Center	2141 K St., NW Washington, DC (202) 944-3411	❑ Mental Health Care
D.C. General Hospital	19th & Massachusetts Ave., SE Washington, DC (202) 675-7026	❑ Dental Care ❑ General Medical Care
D.C. Institute of Mental Health	4250 Connecticut Ave., NW 2041 Martin Luther King Jr. Ave., SE Washington, DC (202) 244-7711 (202) 678-3000	❑ Mental Health Care
East of River Community Health Care	5929 East Capitol St., SE Washington, DC (202) 582-7700	❑ Eye Care ❑ General Medical Care ❑ Mental Health Care
Green Door	1623 16th St., NW Washington, DC (202) 462-4092	❑ Mental Health Care
Family Practice & Counseling Center	212 East Capitol St., NE Washington, DC (202) 547-5070	❑ General Medical Care

MEDICAL CARE

Organization Name	Address & Telephone Number	Services Provided
Hunt Place Clinic	4130 Hunt Place, NE Washington, DC (202) 727-0530	❑ General Medical Care ❑ Dental Care
North Community Mental Health Clinic	3246 P St., NW Washington, DC (202) 282-2229	❑ Mental Health Care
Recovery Incorporated	4509 Woodlark Pl. Rockville, MD (301) 431-1818	❑ Mental Health Care
Seton House at Providence Hospital	1053 Buchanan St., NE Washington, DC (202) 269-7777	❑ Mental Health Care
Shaw Community Health Clinic	1707 7th St., NW Washington, DC (202) 745-4300	❑ Dental Care ❑ General Medical Care ❑ Mental Health Care
Silver Spring YMCA Youth Services	1102 Forest Glen Rd. Silver Spring, MD (301) 593-1160	❑ Mental Health Care
S.O.M.E. Medical Clinic	71 O St., NW Washington, DC (202) 797-8806	❑ Dental Care ❑ General Medical Care
Southwest Health Center	850 Delaware Ave., SW Washington, DC (202) 727-3611	❑ General Medical Care
Upper Cardozo Community Health Center	3020 14th St., NW Washington, DC (202) 745-4300	❑ Dental Care ❑ General Medical Care
Walker-Jones Neighborhood Center	100 First St., NW Washington, DC (202) 724-4370	❑ Dental Care ❑ Eye Care ❑ General Medical Care

MEDICAL CARE

Organization Name	Address & Telephone Number	Services Provided
Washington Free Clinic	1525 Newton St., NW Washington, DC (202) 667-1106	❑ Bilingual Services ❑ General Medical Care
Women's Growth & Therapy Center	3000 Connecticut Ave., NW Suite 407 Washington, DC (202) 483-9376	❑ Mental Health Care
Woodridge Health Center	3012 18th St., NE Washington, DC (202) 576-6654	❑ General Medical Care
Zacchaeus Medical Clinic	1329 N St., NW Washington, DC (202) 265-2400	❑ Bilingual Services ❑ General Medical Care

XIV PAP SMEARS AND BREAST EXAMS

INTRODUCTION

An alarming number of women develop cervical or breast cancer at some time during their lives. If left untreated, cancer can be fatal. However, an important thing to remember is that **cancer is treatable if it is detected early enough.** Early treatment **vastly** increases a woman's chances of recovery and survival. Unfortunately, many women who develop cancer suffer unnecessarily because they did not — or were unable to — take the appropriate steps leading to early detection and treatment. This is particularly true for low-income women, because they are less likely to have access to crucial detection and treatment services in the community. These services include Pap smears, breast self-exams, and mammograms (breast x-rays). This chapter describes each of these procedures, and explains their importance in detecting and treating cervical and breast cancer.

GYNECOLOGICAL CARE

Appropriate gynecological care involves regular pelvic exams, including a Pap smear to detect cervical cancers and infections, and a test for sexually transmitted diseases (STDs). An entire chapter in this manual has been devoted to STDs, so you should read this chapter along with the chapter entitled "AIDS and Other STDs" (Chapter XV).

PAP SMEARS

Although regular pelvic exams and Pap smears are an essential part of routine medical care for women, women prisoners receive gynecological examinations only upon request. Women are supposed to receive a partial gynecological examination when they are first arrested and taken to the Central Detention Facility ("Jail"). This examination should occur within 24 hours of being admitted to the Jail, and should include a regular physical, a breast and pelvic examination, a pregnancy test, a Pap smear, and a test for STDs. In reality, however, this often does not occur because the prison does not have adequate staff to perform these procedures.

Women should receive a complete gynecological exam, including a Pap smear, once a year if they have had normal Pap smears in the past. This is especially true if you are sexually active. A woman who has had an abnormal Pap smear, however, should be tested every three to six months until a normal result is obtained. Because HIV infection and certain other STDs place women at higher risk for cervical cancer, you should have more frequent Pap smears if you are HIV positive, if you have or suspect you have some other STD, or if you have been sexually active with someone who has an STD. You may also need a Pap smear if you experience abnormal periods, unusual abdominal pain, excessive vaginal discharge or discharge that is yellow, green or brown, or bleeding between your periods or during sex.

During a Pap smear, a sample of cells are obtained from the cervix — the lower part of the uterus — as part of a full pelvic exam. The cells are then examined under a microscope to determine if they are normal. Generally, it takes a few weeks to get the results of a Pap smear. However, it may take longer to get the results while you are in prison. If you do not receive your results within a few weeks, you should remind your prison health services. If you still do not receive your test results, you should fill out an IGP form, or contact one of the prisoner advocacy organizations listed at the end of this chapter.

What does an abnormal Pap smear mean?

An abnormal Pap smear indicates one of three things:

- an infection;
- abnormal cell changes that could lead to cancer of the cervix; or
- cancer of the cervix.

Remember, an abnormal pap smear **does not** necessarily mean cancer. In fact, it could be a false negative. An abnormal result also may be an early warning sign indicating you should get treatment. If the Pap smear shows signs of infection, you should receive medicine to treat it. You will also need a follow–up Pap smear or medical visit in a few weeks. If the Pap smear shows the presence of abnormal cells, the condition can frequently be cured before it develops into cancer.

If your test results reveal abnormal cells, you will probably need to undergo a colposcopy. During a colposcopy, the doctor will examine your cervix using a magnifying glass and a bright light. If the doctor detects any abnormal areas on your cervix, s/he will perform a biopsy. A biopsy is the removal of a tiny piece of tissue from your cervix, which is sent to the laboratory for testing. Many women do not require any further treatment after the biopsy. Some, however, will need some additional treatment, either to remove the abnormal cells and prevent them from developing into cancer, or to treat the cancer. If this is the case, you will need to discuss with the doctor the kind of treatment that is right for you based on your test results. Be persistent, and get the information you need to make informed decisions about your medical care.

BREAST EXAMS

One in nine women develop breast cancer. Women who have a history of breast cancer in their family are at greater risk of developing it. But 4 out of 5 women who get breast cancer do not have a history of it in their family.

Unfortunately, African-American woman have higher death rates from breast cancer, because they are less likely to have access to detection services and treatment in the community.

All women, however, can protect themselves against breast cancer by detecting problems as early as possible. You can do this by performing frequent breast examinations on yourself, and by obtaining a timely mammogram, when appropriate. The purpose of breast exams is to detect lumps or any abnormalities in the shape or feel of your breast which may indicate cancer. If you detect a lump — **no matter how tiny** — you should report it to sick call **immediately.** Some women with cancer detect lumps the size of a pea. The earlier you detect cancer, and the smaller it is, the better your chances for successful treatment.

The following sections describe how to examine your own breasts for cancer, and when you should seek a mammogram. Keep in mind that if you do detect a lump or any abnormalities while performing a breast self–exam, stay calm. Some women have lumps in their breasts which feel like cancer, but are cysts, which are **benign** (or non–cancerous) lumps. In fact, over 80 percent of all breast lumps are benign. In addition, many women experience changes in their breasts around the time of their periods, including tenderness, swelling, pain or lumpiness. If the lumpiness persists beyond your period, however, you should report to sick call. Only professional health care providers can determine whether your lump is **malignant** (or cancerous). Therefore, **if you detect a lump, you must take action and request a mammogram through sick call immediately**.

How to Perform a Breast Self-Exam

Ninety–five percent of all breast cancers are first discovered by women examining themselves.

BEST COPY AVAILABLE

Therefore, **it is extremely important that women examine their breasts for lumps, thickening or discharge at least once a month.** Many doctors suggest that women examine their breasts after each period.

There are five steps involved in conducting a breast exam:

Step 1:
Stand in front of a mirror with your arms at your sides and check your breasts for changes in size or shape, changes in position of one nipple compared to the other, or unusual puckering of the skin.

Step 2:
Squeeze each nipple to see if there is any discharge.

Step 3:
Lying down, put a pillow behind one shoulder. Place that hand behind your head.

Step 4:
Take your other hand and gently examine your breast by moving your hand in small circular motions at the outer edge of the breast. Continue making small circular motions, while moving your hand slowly around the edge of the breast. Eventually, you should begin to move your hand inward toward your nipple. You are finished when you have covered your entire breast area. Pay special attention to the area between the breast and the underarm, including the underarm itself. Feel for any unusual lump or mass under the skin.

Step 5:
Repeat steps 3–5 on your other breast.

Pamphlets on the correct way to do a self–exam can be obtained from the medical department of your facility. If you detect any abnormalities, report them through sick call immediately. The medical department will examine you, and refer you for a mammogram, if appropriate.

Mammograms

Mammograms, or breast x–rays, are appropriate in two circumstances. First, when you detect a lump, it is necessary to follow up with a breast x–ray. Second, mammograms are an essential part of routine preventive care for women. Mammograms can find cancer when it is very small — up to 2 years before a woman can feel a lump in her breast. Women age 35 and over are at an increased risk for developing breast cancer, and require increased precautions. The American Cancer Society recommends that women between the ages of 40-50 receive a mammogram at least once every two years. Women over 50 should request a mammogram once a year. Women with a history of breast cancer in their family, however, should consult their doctor about obtaining more frequent mammograms. Remember that if you are over the age of 40, it is not enough for you to perform self–exams. Mammograms are much more sensitive than self–exams.

If you request or are referred for a mammogram, you will be sent to D.C. General Hospital. During your mammogram, the technician will flatten each breast between two plastic plates. The mammogram should not hurt, and will only last a few minutes. If the mammogram confirms that you have a lump, the doctor may want to perform a biopsy to determine whether the lump is cancer. A biopsy involves removing cells from the lump and sending them to the laboratory for testing. It can be performed by extracting them with a needle, or by surgically removing a very small piece of the lump. A biopsy is the only way to determine for certain whether or not the lump is cancerous.

If the biopsy indicates that you do have cancer, you should discuss appropriate treatment with the

doctors at your facility. There are a number of different ways to treat breast cancer. The procedure which is right for you may depend on several factors including the size of your tumor and how advanced your cancer is. You should explore the various options with the medical staff. Because it is very stressful and often frightening to deal with cancer, you may also wish to seek counseling from the social workers at your facility to help you deal with your emotions and stress.

CONCLUSION

Everyone gets worried when they detect a lump in their breast, or if their mammogram or Pap smear indicates a problem. There is nothing wrong with being scared! The important thing is not to let your fear stop you from seeking the care you need right away. Don't fall into the trap of not doing anything and thinking the problem will go away if you ignore it. It won't. You can, however, take action to ensure that you receive early treatment. **Early treatment vastly increases your chances of survival and recovery.**

If you have any problems receiving medical attention or getting the results of your Pap smear or mammogram, or if you feel you are not being given the information you need to make informed decisions, you should bring this to the attention of the medical staff. If your efforts to get through to the medical staff are unsuccessful, submit an IGP form to the Administrator of your facility or to the Director of Health Services (see Chapter VI, "Dispute Resolution"). You will need to be persistent to get the care that you need. If these efforts do not work, contact one of the prisoners' rights organizations listed at the end of this chapter.

RESOURCES

For general information on cancer and for referrals for services near you, call the National Cancer Institute's toll-free Cancer Information Service at 1-800-4-CANCER.

Planned Parenthood provides gynecological exams and Pap smears at two locations in Washington, DC. Fees are based on ability to pay and are often provided free of charge to recently released women.

Downtown

1108 16th Street, NW
Washington, DC 20036
(202) 347-8512

Southeast

2811 Pennsylvania Avenue, SE
Washington, DC 20020
(202) 581-5710

The **YWCA** runs a program called "Encore Plus," which provides breast and cervical cancer education, screening and support to women in the community. The "Y" runs cancer education seminars, refers women for mammograms, and ensures that they follow through with treatment when necessary. The "Y" also runs exercise and support groups for women who have had mastectomies. For more information, contact:

Valerie Ducker
YWCA
624 9th Street, NW
Washington, DC 20001
(202) 628-5672 ext. 309

Organizations performing mammograms in the community. Many of these clinics accept Medicaid and have discounted rates for women without health insurance. The discounted rates listed below are for women without any present symptoms, who: (1) are between the ages of 35-39 and have never had a mammogram; or (2) are over 40 and have not had a mammogram in the past 12 months. The fees vary for women who do not fit into these categories. Medicaid, however, covers the full costs of these services.

Northwest

Providence Hospital
Department of Radiology
1150 Varnum Street, NW
(202) 269–7958
discounted fee: $65

Howard University Hospital
Department of Radiology
2041 Georgia Avenue, NW
(202) 529–3601
discounted fee: $25

D.C. Imaging
2139 Georgia Avenue, NW
(202) 328–1400

Washington Radiology Association
2141 K Street, NW
(202) 223–9722
discounted fee: $60

Columbia Hospital for Women
Betty Ford Center
2425 L Street, NW
(202) 293–6014
discounted fee: $60

Sibley Hospital
Department of Radiology
5255 Loughboro Road, NW
(202) 537–4795
discounted fee: $75

Southeast

Diagnostic Radiology
2041 Martin Luther King, Jr. Avenue, SE
(202) 889–5441
discounted fee: $65

South East Community Hospital
1310 Southern Avenue, SE
(202) 574–6000
discounted fee: $15

If you detect a lump or have been diagnosed with cancer and you are having difficulty getting the treatment you need while you are incarcerated, contact one of the following organizations:

National Women's Law Center
Women in Prison Project
11 Dupont Circle, NW
Suite 800
Washington, DC 20036
(202) 588–5180

D.C. Prisoners' Legal Services Project
1400 20th Street, NW
Suite 117
Washington, DC 20036
(202) 775–0323

XV. AIDS AND OTHER STDS

INTRODUCTION

Today, almost everyone has been impacted by the disease we call AIDS. Everyone knows someone — a brother, sister, lover, or friend — who is infected with the HIV virus, which causes AIDS. Women are the fastest growing HIV-infected population, so it is important that you learn how to prevent the spread of AIDS and other sexually transmitted diseases (STDs). It is equally important to learn how to recognize the symptoms so that if you are infected with the AIDS virus or another STD, you can start receiving medical assistance as soon as possible. Finally, it is important to learn about AIDS because people who are HIV-infected need to be treated with compassion and understanding, just like people with cancer or other chronic diseases. The more you know about AIDS, the better you can help yourself and others.

WHAT ARE STDS?

Sexually transmitted diseases, also called venereal diseases, refer to infections passed between people through unprotected vaginal, anal, or oral sexual practices. Included in this category are diseases such as chlamydia, herpes, gonorrhea, and syphilis. The usual signs of an STD are cold sores or warts around the vaginal area and a burning sensation when urinating. Sexually transmitted diseases are particularly dangerous because they could cause sterility or other problems if left untreated.

Although AIDS can be sexually transmitted, we have discussed it separately from other STDs because of its particular effects, the mode of transmission, and because often other STDs are warning signs in women of HIV infection. However it is important to remember that the same behavior that puts you at risk for other STDs — unprotected sex, multiple sex partners, and alcohol and other drug use — also put you at heightened risk of getting AIDS.

WHAT IS AIDS?

AIDS, or "Acquired Immune Deficiency Syndrome," is a disease caused by HIV, or the "Human Immunodeficiency Virus," which is transmitted through the exchange of blood or semen. AIDS is a disease which attacks the body's immune system. The immune system is your body's defense against disease. This means that if you have HIV you are more likely to become sick from other infections and diseases that would have little effect on an otherwise healthy person. When you are HIV infected and develop these "opportunistic infections," you are considered to have AIDS.

Many people are infected with HIV for quite a number of years without developing full-blown AIDS. Although there is no cure at this time, new treatments and drug therapies enable people to live for longer and longer periods of time with HIV and AIDS.

HOW TO PREVENT AIDS AND OTHER STDS

AIDS, gonorrhea, syphilis, herpes, chlamydia and other STDs have one thing in common: they can be prevented by using condoms and dental dams. Unprotected vaginal, anal, or oral sex puts you at risk for developing one or all of these diseases.

Unlike the other diseases, AIDS can be spread not only through semen and vaginal fluid, but also through blood, by sharing needles, and through breast milk. AIDS is not transmitted through casual contact, so you should not be afraid of contracting AIDS from drinking out of a water glass used by a person with AIDS or HIV, using a toilet used by an HIV-infected person, or by hugging someone who has AIDS or HIV.

Why it is Important to Use Condoms

It is very important to use condoms when having sex, including anal and oral sex, whether in prison or in the free community. First, there is a greatly increased chance of contracting HIV in prison because 1 in 5 inmates in DC 's prison population are infected with HIV. Second, women who are HIV infected and become pregnant can pass the virus on to their babies in the womb. There is a 15–30% chance that an HIV–infected woman will pass her virus on to her child (although appropriate medication can reduce this risk). Third, unprotected sex in prison could result in not just pregnancy, but HIV infection as well. Using condoms during sex will not guarantee that you will not get or transmit HIV infection, but it greatly reduces the risk of transmission. Not using condoms also puts you at risk for contracting other sexually transmitted diseases.

In addition to using a condom, it is important to use the condom properly. For example, make sure that the condom is pre–lubricated, or that you use other lubricants with the condom. Using lubricated condoms will reduce friction during intercourse and thereby reduce the likelihood that condoms will break. Many of the condoms distributed by the Department of Corrections are pre–lubricated. However if you do use unlubricated condoms, it is very important to use water–based lubricants (such as K–Y Jelly). Lubricants which contain petroleum, such as vaseline or hand creams, can actually cause condoms to deteriorate and break. If you do not have a lubricant available, at a minimum, you should wet the condom with saliva.

Also make sure that the condom is made of latex. Other condoms such as natural skin or lambskin have not been proven to stop transmission of HIV infection.

How to Get Condoms While Incarcerated

Although sexual activity is **prohibited** within the prison, the Department of Corrections is supposed to educate all inmates and staff about AIDS, and to make condoms and dental dams available in each facility. However, many prisoners are not aware that condoms are available. In most of the facilities, condoms are available in the medical units. In order to receive condoms, you should sign up for sick call and request them from medical personnel, or request them from the medical social worker assigned to your facility.

Unfortunately, the Department of Corrections still has not made dental dams available to women prisoners. Until dental dams are available, health workers suggest that if you have oral sex with a woman, you should slit a condom on one side and unroll it so that it opens up. Then place this over the vaginal area before initiating contact. Plastic wrap can also be used as a substitute for dental dams.

Remember that **even though condoms are distributed inside the prisons, sexual contact between inmates or between inmates and staff is strictly prohibited**. You will still be punished if you are caught having sex. But, if you do decide to have sex while in prison, always use a condom or a dental dam.

THE SYMPTOMS OF HIV/AIDS

HIV infection is a disease with three phases. In the first phase you have no symptoms of the disease but may transmit it to others. In the second phase you may have a few symptoms and your immune system may become impaired. Finally, when your T–cells drop below 200, you have developed AIDS.

Phase One of HIV

During the first phase, you have the virus in your system and can transmit it to others, but you have no symptoms of disease—or are asymptomatic. This phase can last for several years. Many people who are in the first phase of HIV do not even know that they are infected.

Phase Two of HIV

In the second phase, your immune system starts to be damaged and you are at a greater risk for getting sick. You pass into the second stage when a blood test indicates that the level of certain disease-fighting blood cells, known as CD4 or T4 cells ("T-cells"), is low. A level of less than 500 cells per cubic millimeter of blood indicates that your immune system has been damaged. Normally, people have a range of T-cells from 500 to 1300. Your T-cell count will fluctuate depending on many factors, including whether you are currently fighting infection, undergoing chemotherapy, etc. However, if you have HIV and your T-cell count drops below 500, your immune system has been impaired. If your T-cells drop below 200, you have developed AIDS.

Many people with HIV have some symptoms of disease but are not yet considered to have AIDS. These symptoms may vary, from weight loss or chronic headaches to repeated yeast infections, irregular menstrual bleeding, or sinus infections. If you suffer from these kinds of symptoms and do not know if you are HIV-infected, it is very important that you be tested.

Phase Three — AIDS

The last phase is AIDS. You have AIDS if you are infected with HIV, have a T-cell count below 200, and you have had an AIDS-related disease. These diseases are known as "opportunistic infections." Some of the more common opportunistic infections in women are:

- pelvic inflammatory disease (PID)
- chronic yeast infections (vaginal candidiasis)
- genital warts (human papillomavirus)
- PCP pneumonia (or pneumocystis carinii pneumonia)
- infections causing abnormal Pap smears (or cervical dysplasia)

If you do not know your HIV status and you frequently have one of these infections or have difficulty getting rid of an infection, you may want to get tested for HIV. If you find out that you are HIV-infected, it is very important that you receive medical care immediately.

HOW AND WHY TO GET TESTED FOR HIV

For many people, deciding to get tested for HIV and to face the possibility of HIV infection is a very difficult decision to make. Getting tested is important because it is the first step toward getting treatment.

The earlier you are tested for HIV, the earlier you can begin receiving medical treatment that can prolong your life and delay or prevent the onset of other diseases. There is some evidence that receiving antiviral drugs such as AZT or ddI lengthens the time between initial HIV infection and the development of full-blown AIDS. While current Centers for Disease Control guidelines indicate that these medications should not be taken until a person's T-cell count drops below 500, many providers begin medications earlier. These medications may also prevent the transmission of HIV by a pregnant woman to her fetus. In addition, once your T-cells drop below 200, you can also begin receiving bactrim, a drug which will help prevent the onset of pneumocystis carinii pneumonia (PCP), a form of pneumonia common among persons with HIV infection.

In order to get an HIV blood test, you should sign up at sick call and request a test. Prior to

taking the test, the medical staff should meet with you and counsel you about HIV. You should ask any questions that you have at this time. It may take several weeks to receive the results of your HIV test. This delay has no relation to the outcome of the test. Be persistent about getting your test results. You should receive your tests in a private and confidential manner. The test results should be given to you by medical staff or staff trained in HIV/AIDS issues. A negative test result means you do not have HIV, while a positive test result means you do. You should also receive counseling when you receive your results regardless of whether they are negative or positive.

HOW TO GET TESTED FOR OTHER SEXUALLY TRANSMITTED DISEASES

The Department of Corrections is supposed to check you for STDs at intake at the Jail. However, this does not always occur. If you think that you have contracted an STD, you should request a gynecological examination from the medical staff immediately. During your physical examination, you can request more information about STDs and inform the physician that you believe you have contracted an STD. Additionally, periodic health education sessions which address STDs are offered to women prisoners by health providers like Planned Parenthood, the D.C. Women's Council on AIDS, or the Whitman–Walker Clinic.

THE CONFIDENTIALITY OF TEST RESULTS

The Department of Corrections' policies and the Constitution of the United States require that all medical information be kept confidential, and that no one disclose your medical condition to any non–medical personnel. Generally speaking, only health services personnel should have access to your medical folder, or to information regarding your health status, unless you give your permission for it to be disclosed. If, however, you find that your medical status is not kept confidential, you should submit an inmate grievance form (IGP) to the Warden of the facility where the violation of your privacy occurred (see Chapter VI, "Dispute Resolution"). If the IGP process does not resolve your complaint, you may want to contact one of the prisoner advocacy groups listed at the end of this chapter and inform them that your medical information was not kept confidential.

SERVICES FOR THE HIV–INFECTED INMATE

If you test positive for HIV, you should educate yourself about the disease and learn to advocate for appropriate medical care and other services. Find out everything you can about how the disease progresses. Keep up on new developments in treatment. Learn the names of the symptoms or illnesses you have and the names of the prescription drugs you are given, including their dosage. Remember which treatments work, and which do not work. You can send for literature from the AIDS organizations listed at the end of the chapter. The more you know, the better the advocate you can be for yourself.

Medical Care

Many of the medical problems connected with HIV can be treated by physicians at each correctional facility. You can also request to be sent to the HIV Clinic at D.C. General Hospital for evaluation, particularly if you develop symptoms of the disease. However, sometimes physicians and staff do not follow through on prisoners' medical needs — including transportation to medical visits, prescribing special diets, and follow–up for medical problems. You must keep up with your medical treatment and bring it to the

attention of the medical staff and the Warden both informally and formally through the IGP process, if necessary.

- **Address problems with your medical treatment**

You should begin to address a problem with your medical treatment by bringing it to the attention of the medical staff. Although you may be very frustrated by the situation, it is important to remain polite and courteous, but firm. Yelling or screaming at the medical staff will only make your situation worse. If your efforts to get help through the medical staff are unsuccessful, submit an IGP to the Warden, or to Health Services. Sometimes, you will have to be persistent to make sure you get the treatment you need. If these efforts do not work, you should contact one of the prisoners' rights organizations listed at the end of this chapter.

- **Keep a journal of your medical information**

Keep a journal of your medical information, including when you experience symptoms, what kind of symptoms you experience, the results of tests, missed appointments, dates when you signed up for sick call but were not seen, the names of doctors who treated you, etc. Also, try to keep track of other aspects of your general health. Make sure your doctor weighs you during every visit and keeps track of this information. If you develop yeast infections or other gynecological symptoms, tell your doctor and demand effective treatment, and keep a record of this information yourself. This will help you keep track of your health and the treatment you should be getting, and will assist advocates in helping you if your efforts are not successful.

- **Make decisions about additional medications**

You should discuss with your physician whether or not to begin medications such as AZT, or "retroviral" drug therapy. Two of the most well-known retrovirals are AZT and ddI. Some medical researchers believe that retroviral treatment can delay the development of AIDS among people with HIV. However, other researchers disagree. You should discuss this issue with your doctor so you can make an informed decision about whether you should begin retroviral treatment. This is especially important if you are pregnant, since AZT has been reported to reduce the likelihood that an HIV-infected woman will transmit the disease to her fetus.

However, there are many other treatments available to prevent certain opportunistic infections. For example, a drug called bactrim can prevent pneumocystic carinii pneumonia (PCP), the most common opportunistic infection. If your T-cell count is below 200, you should make sure your doctor prescribes bactrim for you (or a drug called "aerosolized pentamidine" if you are allergic to bactrim).

- **Get more frequent gynecological exams**

In addition, women who are HIV-infected but do not have symptoms should have a gynecological exam, Pap smear, and rectal exam every six months to check for lesions or early signs of cancer. HIV-infected women with symptoms of disease should receive these examinations even more frequently (see Chapter XIV, "Pap Smears and Breast Exams"). Some common symptoms are chronic yeast infections, fevers, extreme fatigue, and unexplained weight loss.
Although there is currently no cure for AIDS, the medical community has made a great deal of progress in treating the opportunistic infections associated with the disease. As newer and better

treatments become available, advocates on the outside will fight to make these available to prisoners as well. Be aggressive about getting the medical treatment you need and demand the latest and most effective treatments.

- **Get Tested for Tuberculosis**

While tuberculosis, or "TB," is an important concern for anyone living in an institutional setting such as a prison, it should be a particular concern for people with HIV or AIDS. This is because people with weakened immune systems are more likely to contract TB. It is very important for prisoners with HIV or AIDS to get tested for TB on a regular basis. TB is discussed in detail in Chapter XIII, "General Medical Care".

Nutrition

It is important to take care of your body if you are HIV-infected because the stronger your body is, the better able it will be to fight off infection. You should try to eat as healthy a diet as possible, although this can be difficult in prison. In order to get the nutrients you need, try to eat a balanced diet of the four basic food groups: (1) meat or a meat alternative such as beans; (2) milk or dairy products; (3) fruits and vegetables; and (4) cereals and grains. You can ask a doctor to prescribe a special diet for you, although it is often difficult to receive special meals consistently. In addition, you should try to exercise, to get enough sleep, and to avoid stress. Healthy habits will go a long way toward keeping you healthy.

Compassionate or "Medical" Release

In the late fall of 1992, the DC City Council passed the Medical and Geriatric Parole Act, a law which allows the early parole of elderly, permanently incapacitated, or terminally ill inmates. This law went into effect in May of 1993. This law excludes individuals who have not yet served any statutory mandatory minimum sentences. These people are not eligible for medical parole. After an inmate has served her mandatory minimum sentence, she is eligible for medical parole if she falls within the definitions of the bill. An inmate can request parole consideration on his or her own behalf by writing to:

Margaret Quick, Chair
DC Board of Parole
717 14th Street, NW
Washington, DC 20005

and

William Plaut
Associate Director for Operations
Department of Corrections
1923 Vermont Avenue, NW
Washington, DC 20001.

An advocate or correctional personnel, such as a case manager, can also submit a request for an inmate. If you believe you may be eligible for medical release, you may contact: D.C. Prisoners' Legal Services Project at (202) 775-0323 for further information.

Once you have filed an application, your case manager will prepare a parole package for you, including a medical summary from a treating physician at your facility, and send it to the Parole Board. If the Parole Board decides to grant you medical parole, they will not parole you until they have prepared a parole plan for you. The process takes anywhere from one to four months.

Education

It is important to become as well-informed as you can about HIV and AIDS. There are a number of organizations which come into the prisons to conduct education sessions. You should contact one of the following for information:

Whitman–Walker Clinic Education Department
Keesler King or Beverly "Candy" Fleming
(202) 797–3560
[education sessions, support, handouts on AIDS prevention, medical guides, nutrition guides]

Gail Terry
D.C. Women's Council on AIDS
(202) 544–8255
[education, support]

Alan Cephas
Inner City AIDS Network (ICAN)
(202) 789–4226
[education sessions]

Damien Ministries
Skip McDonough
(202) 387–2926
[visits inmates with AIDS]

D.C. Prisoners' Legal Services Project
Aurie Hall and Jonathan Smith
(202) 775–0323
[visitation program for HIV–infected inmates]

You also may be able to start an inmate support group at your facility. Inmates at the Correctional Treatment Facility (CTF) have an ongoing support group for HIV–infected inmates. They also conduct outreach and education seminars on HIV for other inmates at CTF. If you are interested in starting a support group at your facility you may want to contact Dr. William Davidson, the psychologist at CTF, to find out how the CTF support group was started. In addition, one of the groups listed above or the medical social workers may be able to help you start a support group.

There are medical social workers assigned to each of the facilities who offer AIDS education, assistance with medical treatment, and assistance with community services once you are close to release. You can contact them through the medical unit at each of the facilities.

RESOURCES

Before you are released, you should contact the medical social worker assigned to your facility to help you apply for public benefits, or to arrange appointments with a case manager in the community. After you are released, if you want legal help with public entitlements (social security benefits, for instance) or writing a will, call the **Whitman Walker Clinic Legal Services Department at (202) 797–3527** to make an appointment. In addition, if you need help with other legal problems, the Whitman Walker Legal Department runs a free clinic on Monday nights at 6:15 p.m. on a first come, first serve basis. Their address is **1407 S Street, NW, Washington, DC 20009**. D.C. General Hospital also has a social work department which can assist you with entitlements and other problems.

Planned Parenthood provides HIV testing and counseling, along with STD screening and treatment, at two locations in Washington, DC.

Downtown

1108 16th Street, NW
Washington, DC 20036
(202) 347–8512

Southeast

2811 Pennsylvania Avenue, SE
Washington, DC 20020
(202) 581–5710

The Whitman Walker Clinic provides free, confidential HIV testing. In addition, Whitman Walker provides referrals to medical centers treating people with HIV and AIDS.

Whitman Walker Clinic
1407 S Street, NW
Washington, DC 20009
(202) 332–EXAM (HIV testing)
(202) 797–3500 (treatment referrals)

These clinics also provide STD screening and treatment:

D.C. General Hospital, Building 8
1900 Massachusetts Avenue, NE
(202) 727–3605

Children's Hospital
111 Michigan Avenue, NE
(202) 745–5464

Northwest STD Clinic
3020 14th Street, NW
(202) 673–7403

Southeast STD Clinic
1900 E Street, SE
(202) 727–3605

Washington Free Clinic
1525 Newton St., NW
(202) 667–1106

If you are an HIV–positive prisoner and you are not getting the services you need, or if you need help applying for compassionate release, contact one of the following organizations:

National Women's Law Center
Women in Prison Project
11 Dupont Circle, NW
Suite 800
Washington, DC 20036
(202) 588–5180

D.C. Prisoners' Legal Services Project
1400 20th Street, NW
Suite 117
Washington, DC 20036
(202) 775–0323

XVI. PREGNANCY

INTRODUCTION

Prisoners are entitled to the same level of medical care as people who are not incarcerated. This means that pregnant prisoners should receive timely prenatal exams, a proper diet, counseling, and post-partum care. In addition, pregnant women also have the right to choose whether to carry their pregnancy to term or to terminate it. Finally, pregnant prisoners have the right to ensure that their child is placed, temporarily or permanently, with persons of their own choice.

Women often find it extremely stressful to be pregnant while they are incarcerated. It often takes a long time to get test results, and many women find it difficult to get the proper care and counseling services they need. In addition, women worry about how to care for their babies, or who will care for them, once they are born.

You can, however, take an active role in obtaining the care and the services that you need, whether or not you decide to carry your baby to term. If you are persistent, you will get the care and services that you need. This chapter describes what you should do if you are pregnant, the services you should receive, and how to obtain these services while you are incarcerated. Because many pregnant prisoners need to arrange for the care or placement of their babies once they are born, you should read this chapter along with the chapter on child custody (see Chapter XIII, "Child Custody Concerns for Incarcerated Women").

DETERMINING WHETHER YOU ARE PREGNANT

If you suspect that you are pregnant, you will need a pregnancy test to be sure. All women prisoners should receive a pregnancy test upon intake at the Jail. In order to get a pregnancy test while you are incarcerated, you must go through the regular sick call. The medical facility at your prison will conduct the test. Normally, it takes only a few days to get the results of a pregnancy test. However, in prison the process often takes weeks. The wait can be extremely problematic and stressful for many women, especially if you are considering having an abortion, because the earlier you obtain an abortion, the safer it is.

If you are having difficulty getting either a pregnancy test or the results of your test, discuss this with the staff at your medical facility or with your case manager informally. If your efforts to resolve this informally are unsuccessful, file an IGP form (see Chapter VI, "Dispute Resolution"). If an IGP is not effective, contact one of the prisoners' rights organizations listed at the end of the chapter.

DECIDING WHETHER TO HAVE THE BABY

If your test results reveal that you are indeed pregnant, you must decide whether to carry the pregnancy to term or to have an abortion. This is a very personal decision that you must make based on your own circumstances, including other family responsibilities, family support, finances, your incarceration, and your own feelings about having a baby and being a parent.

There are very few counseling services in prison to help you make this decision. You can discuss this with the social worker at your facility. There are several organizations listed at the end of this chapter that provide information and counseling for pregnant women. If you need information, seek their assistance, then make the decision that is best for you.

OBTAINING AN ABORTION

Obtaining an abortion while incarcerated is often a difficult process. First, abortions cannot be performed by the Department of Corrections personnel or within the correctional institutions operated by the Department. Moreover, D.C. General Hospital, which provides care for prisoners, no longer performs abortions. Incarcerated women must therefore obtain abortions at local private clinics.

If you want to obtain an abortion, you must submit a written request to the appropriate medical official at the Department of Corrections. The official may assist you by providing you with information on alternative abortion funding and religious counseling. If you decide to have an abortion, you must also sign a statement which states that you have voluntarily decided to have the abortion, and explain how you plan to pay for it. In principle, you must make all the arrangements and must pay for all costs related to having an abortion.

In the past, Planned Parenthood of the National Capital Area has provided the funding for prisoners' abortions. Their address is listed at the end of this chapter. However, the D.C. government has not allocated funds this year to Planned Parenthood for abortions. Planned Parenthood does provide discounts to women receiving Medicaid and women who do not have health insurance. Contact them as early as possible to provide them with enough time to make the necessary arrangements so that your pregnancy is not so far advanced that it cannot be terminated safely. Be aware, however, that you will be shackled and handcuffed during transport to the clinic, at the clinic and upon return. Some women have reported that guards have been present in the room during their abortion.

SERVICES FOR PREGNANT WOMEN

Housing

Pregnant prisoners, whether pre–trial or post conviction, are housed in the 32–bed pregnancy unit at the Correctional Treatment Facility ("CTF"). If you are pregnant, you will be transferred to CTF for the duration of your pregnancy regardless of your security status.

Medical Care and Social Services

As a pregnant inmate you should receive:

- a special diet with increased portions, snacks, and milk;
- scheduled prenatal exams at CTF for low risk pregnancies, and at D.C. General Hospital for high risk pregnancies;
- at least one sonogram (a painless procedure using sound waves which transmits a picture of your fetus);
- assistance finding care for the baby until your release;
- counseling and social services;
- prenatal exercise classes;
- parenting classes; and
- monitoring of any chronic health conditions. For example, women who are heroin dependent should receive low doses of methadone for the duration of their pregnancy. Also, dietary supplements should be given to women who have problems gaining weight.

BEST COPY AVAILABLE

You must monitor the services that you are receiving and request any of the services that are not provided. They are all very important for maintaining your health and the health of your baby. They are especially vital to women prisoners, whose pregnancies are often high-risk because they are complicated by poor nutrition, drug use, smoking, HIV and other sexually transmitted diseases, diabetes, high blood pressure (hypertension), and obesity. If you are not receiving these services, you should insist on seeing a physician and make both informal and formal complaints if your request is denied. You can also contact one of the prisoners' rights organizations at the end of this chapter.

Delivery

Pregnant prisoners deliver at the D.C. General Hospital Obstetrical Ward. When you are ready to deliver, you will be transported to D.C. General Hospital in either an ambulance or a sedan. If you are in labor, you should not be shackled or restrained. While this is the rule, women still report being shackled or handcuffed. After delivery, with the consultation of medical authority, you may be restrained by one extremity, generally an arm. You will be returned to the prison infirmary the day after you deliver your baby, if you had a vaginal birth. Prisoners who undergo caesarean sections are generally given three days of hospital bed rest, and are returned to the pregnancy unit at CTF when they receive medical clearance.

Post-Partum Care

Many women experience emotional and physical changes after childbirth including pain, bleeding, soreness, fatigue and depression. These problems are often worse for women prisoners, because they are forced to leave their baby and the hospital almost immediately after giving birth. Women who experience prolonged depression may want to ask to see the prison psychologist. You should also receive a post-partum medical check-up six weeks after you deliver, at which time you should address any physical concerns that you have. Ask to see the doctor sooner if you experience persistent pain or bleeding. Again, if you have problems obtaining your six-week check-up or other post-delivery care, discuss this informally with the prison medical staff or your case worker, or file an IGP form.

ARRANGING CHILD CARE PLACEMENTS

If you do not make arrangements for the care of your baby for the duration of your incarceration, s/he will be labeled as "abandoned," and social services will place the child with family members or in foster care. This could make it difficult for you to regain custody after your release. In order to avoid this problem and to ensure the best care for your child, you must make child care placement arrangements well before your due date. You have several options, and social workers at CTF and D.C. General Hospital should assist with these arrangements. There are also other resources in the community that are listed at the end of this chapter. The reality is, however, that you will have to make sure that proper plans are made for the care of your baby after its birth. (See Chapter XI, "Child Custody Concerns for Incarcerated Women".)

CONCLUSION

While it is not easy to be pregnant while you are incarcerated, there are steps you can take to ensure a healthy pregnancy. If you choose to carry your pregnancy to term, try to eat well, attend prenatal exercise classes, and go for your prenatal check-ups. It is also important to both your health and your baby's that you **refrain from smoking** while you are pregnant. It is

especially important that you **do not use alcohol or other drugs while you are pregnant**. If you are not getting the services outlined in this chapter, be persistent. If you will still be incarcerated after your baby is born, make sure to arrange for someone to care for your child far in advance. The chapter on child custody will help you with these arrangements. Finally, if you have been released to the community and are pregnant or are caring for young children, you may be entitled to certain entitlements such as WIC, AFDC, and Medicaid. Refer to Chapter XVIII, "Public Benefits," for more information on these programs.

RESOURCES

Planned Parenthood provides abortions, pregnancy-related counseling, pregnancy testing, and birth control at two locations in Washington, DC. Fees are based on ability to pay and services are frequently provided free of charge to recently released women.

Downtown

1108 16th Street, NW
Washington, DC 20036
(202) 347-8512

Southeast

2811 Pennsylvania Avenue, SE
Washington, DC 20020
(202) 581-5710

Clinics Providing Prenatal and Wellbaby Care (these clinics accept Medicaid):

Northwest

Adams Morgan Health Center
2250 Champlain Street, NW
(202) 673-7702 (prenatal)
(202) 745-5580 (pediatrics)

Community Medical Care
1118 9th Street, NW
(202) 408-9835

Mary's Center
1844 Columbia Road, NW
(202) 483-8196

Northwest Pregnancy Center
1314 14th Street, NW, Suite 4
(202) 483-7008

Children's Comprehensive Health Care Program
2220 11th Street, NW
(202) 745-5500 (pediatrics)

Upper Cardozo Health Center
3020 14th Street, NW
(202) 745-4300

Walker-Jones Health Center
1100 1st Street, NW
(202) 724-4375

Zacchaeus Medical Clinic
1329 N Street, NW
(202) 265-2400

Northeast

Center for Life, Inc.
1150 Varnum Street, NE
(202) 269-7437

Eckington Clinic (pediatrics)
60 Florida Avenue, NE
Room 5
(202) 673-7739

Fifteenth Street Health Center
702 15th Street, NE
(202) 727-0395

Hunt Place Health Center
4130 Hunt Place, NE
(202) 727-0527

Woodridge Health Center
2146 24th Place, NE
(202) 541–3819

Southwest

Southwest Health Center
850 Delaware Avenue, SW
(202) 727–3611

Southeast

Anacostia Health Center
1328 W Street, SE
(202) 645–4132

Benning Heights Health Center
4600 Benning Road, SE
(202) 645–4161

Congress Heights Health Center
3855 8th Street, SE
(202) 645–4155

D.C. General Hospital
19th & Massachusetts Avenue, S.E.
OB Bldg #9, Ground Floor
(202) 675–7026

East of the River Health Center
5929 East Capitol Street, SE
(202) 582–7700

If you are pregnant and are not receiving prenatal services, or if you are having difficulty obtaining the results of your pregnancy test while you are incarcerated, contact the following organizations:

National Women's Law Center
Women in Prison Project
11 Dupont Circle, NW
Suite 800
Washington, DC 20036
(202) 588–5180

D.C. Prisoners' Legal Services Project
1400 20th Street, NW
Suite 117
Washington, DC 20036
(202) 775–0323

XVII. GETTING HELP FOR DRUG ADDICTION AND ALCOHOLISM

INTRODUCTION

"It took me 23 years to get clean and that was a terrible waste. I really wish I had made the decision to do something different many years ago."

Anne P.

One of the most difficult steps for a woman who is addicted to alcohol or drugs to take is to admit that she has lost control over her drinking or drug use and needs help. Alcohol and drugs are so much a part of our culture that the line between casual use and addiction can be very unclear. Many women cross over the line before they are aware what has happened. Once a woman becomes dependent on drugs or alcohol, it is impossible to imagine life without it.

Drug addiction and alcoholism are diseases of denial. A woman with an addiction denies the problem even though it has taken over her life and sometimes destroyed everything around her. Anne, a recovering drug addict, summed up her own denial when saying "I thought I simply used because I wanted to." Anne used drugs every day and spent over 20 years in and out of prison for drug-related crimes.

Not all addicts and alcoholics end up in prison. Some die of their addiction, while others end up in institutions for the mentally ill. Others, however, get clean and sober. This chapter describes the various types of drug treatment available to women both in prison and in the community.

DRUGS AND ALCOHOL AS WOMEN'S ISSUES

In recent years, there has been far more attention to drugs and alcohol as women's issues. Today, we know that alcohol and drugs play a major part in many of the problems women face in their daily lives including domestic violence, teen pregnancy, incest and rape, homelessness, poverty, and crime. While alcohol and drug use may not directly cause these and other problems, they often play a significant role and must be examined before women can move on and rebuild their lives.

It is often more difficult for a woman than it is for a man to admit she is dependent on drugs or alcohol. In our society and in many others, it is far more acceptable for men to drink and use drugs. Women with drug and alcohol problems are viewed in a negative light–as sexually available, bad mothers or morally weak. At the same time, women are bombarded with advertising that encourages them to use legal drugs such as alcohol to be the perfect woman–beautiful, sexy, in control, powerful, rich. These messages are not only confusing but untrue, and they often feed a woman's denial when she develops a problem with alcohol or drugs.

"'I knew all my life that I was a phony,' said Joan, a youngish, soft-faced woman dressed in jeans and a red T-shirt. She looked up at the other women sitting around the circle, her face tight with remembered pain. 'I knew that I was intellectually inadequate and physically fat and that I had nothing going for me. But when I drank, baby, I was beautiful. I was bright. I was sharp. And as the years went by, the booze became the only thing I could count on to keep telling me that I was wonderful. Except that I would wake up each morning and find that I had turned from Cinderella back into a char-girl again - so I would have to drink some more to forget.'"

The Invisible Alcoholics, p.79.

WHAT ARE THE SIGNS OF ADDICTION?

"I just lost control of my drinking. Every day I would wake up and promise myself I wouldn't drink. I meant that promise. And, at the end of every day, I would pass out drunk. I wanted more than anything to stop, but just couldn't."

Susan G.

There are some simple questions you can ask yourself to determine whether you are an alcoholic or a drug addict. A questionnaire developed by the Women's Action Alliance on alcohol use is provided at the end of this chapter. Since many incarcerated women are mothers and have concerns about their children, also included are questions on how to tell if your child is using or abusing alcohol or drugs. Both N.A. and A.A. have simple checklists that ask similar questions at the end of their meeting directories.

Some of the important questions to ask yourself are:

- Do you drink or use drugs when you are depressed, hoping that it will make you feel better?
- Do you drink or use drugs when you are under pressure or after an argument?
- Do you wonder if anyone knows how much you drink or use drugs?
- Have you ever had a blackout?
- Do you worry about hurting your child or children when you have been drinking or using drugs?
- Do you use alcohol or drugs to have or avoid sexual activity?
- Do you drink or use drugs when you have been emotionally or physically abused?
- Do you become defensive when anyone mentions your drinking or drug use?

Think about these questions. They come from the questionnaires at the end of this chapter. Take some time to answer the full survey. The most important thing to remember is that help and support is available if your answers indicate you have a problem.

WHAT DOES TREATMENT INVOLVE?

Generally, the goals of treatment are simple and straightforward. They include:

- Safely withdrawing an individual from drugs or alcohol;
- Assessing the physical, psychological, emotional, and family problems that have been caused or aggravated by chronic alcohol and drug use and developing a structured individualized treatment plan to address these problems;
- Helping people to identify and accept their addiction, the consequences of continued alcohol and drug use, and the need to take personal responsibility for recovery;
- Providing information on alcoholism and drug addiction as chronic and many faceted diseases;
- Assisting people to restructure their lives in order to stay clean and sober;
- Assisting people to become a part of sober communities for ongoing support (such as N.A. or A.A.);
- Assisting people to function in society–in relationships, in families, in work and, if necessary, in acquiring basic education, employment, and living skills; and
- Helping people to stay out of future legal trouble.

TYPES OF TREATMENT

There are several different types of treatment for alcohol and drug addiction. Women differ in the types of treatment they require, and the intensity of the services they need. Many women need to begin in a more intense program, and then move to less intense treatment as they proceed down the path to recovery. You should explore the various options, and then create a treatment program that is right for you.

Detoxification

Detoxification programs are designed to safely withdraw individuals from drugs and alcohol. They are usually short-term programs lasting from 3 to 11 days.

Outpatient

Outpatient treatment can include individual, group and family counseling. Outpatient programs range in the amount of services they offer. Some have day or evening programs while others provide only limited counseling sessions. The different types of outpatient programs are called outpatient, intensive outpatient, or day treatment.

Inpatient

Inpatient treatment can include short (7-11 days) or long-term (28-60 days) programs. These services are often provided in hospitals. The goal of inpatient programs is usually to safely detoxify the individual from drugs, provide education about addiction, and link individuals with community resources to provide support for ongoing recovery.

Residential

Residential treatment can also include short (21-28 days) or long-term (6-18 months) programs. These programs provide supportive, drug-free living environments. They usually have structured treatment that includes: individual, group, and family therapy; educational sessions; medical services; and assistance in obtaining education and jobs.

Self-Help Groups

Self-help groups are not considered treatment but do provide a powerful source of support. They include Narcotics Anonymous (N.A.), Alcoholics Anonymous (A.A.), Cocaine Anonymous (C.A.) and AlAnon (for families and friends). These groups provide ongoing support for individuals who are alcohol or drug dependent. They are free. Local phone numbers are listed later in this chapter. The halfway houses may also hold self-help group meetings on site. (See Chapter X, "Halfway Houses".)

WHERE TO GET HELP

"I never knew where to look for help. I started using very young in the early 70's and I just didn't know where to go for help. Then I came to realize that it wasn't that easy. I was approaching 40. I had spent half of my life going to prison for drugs. The difference this time was that I made the necessary decision to do something different. I started to disassociate myself with certain people. Going to meetings. Keeping it simple. When I was in meetings and I was uncomfortable, it was nothing like what I went through using."

Anne P.

There are many different routes to getting clean and sober. Some women are able to get clean and sober through the support of other women and men in self-help groups such as N.A. or A.A. Other women need intensive and long-term treatment in a drug-free supportive environment before they are able to stop drinking and using drugs. Some women return to church for the support they need to turn their lives around. There is no right or wrong way to get clean and

sober. But most women find that the ongoing support of other women in recovery is central to their own recovery program.

Today, there are far more drug treatment programs designed for women than ever before. These programs provide a supportive environment where women can share safely with each other their experiences and their struggles to stay clean and sober. Some provide supportive counseling services for the entire family, which may include individual and group counseling. The staff at several of the specialized women's programs are trained to help women deal with difficult past experiences which play a role in their addictions, such as sexual or physical abuse by family members, partners, and others, child abuse or prostitution.

TREATMENT IN PRISON

Due to budget cutbacks, the DC Department of Corrections has reduced the scope and number of drug treatment programs available to incarcerated women. Although it was very difficult to obtain information about drug treatment in the Department of Corrections, it appears that three programs currently exist for women: (1) an 18-month intensive program at the Correctional Treatment Facility ("CTF"); (2) a 6-month program at CTF; and (3) a 30-day education program at the Lorton Minimum Security Annex ("Annex"). In addition, twelve-step programs such as N.A. are conducted in each of the facilities on a weekly basis by members of the community.

Generally, the number of treatment slots available in the treatment programs are limited. If you need drug treatment but are not receiving services while you are incarcerated, you should discuss this with your case worker. Be persistent, even if it is difficult to obtain information or if you are told that no space is available in a program. Prior to your release, you should explore with your case worker options for obtaining or continuing treatment in the community once you are released.

Intensive Substance Abuse Program (CTF)

The Intensive Substance Abuse Program is the only comprehensive long-term drug treatment program for incarcerated women in DC. This 12-18 month residential program is located at CTF and serves 32 women. Program participants are housed on a special unit, separate from the general women's population. Women who are not housed at CTF may request to be relocated to CTF to participate in the treatment program, if there is space in the program.

Program Requirements

In order to be admitted into the program, you must be referred by either your case manager or the court. If a referral is made on your behalf, the director of the program will interview and evaluate you. If the director decides that you meet the following requirements, you will be admitted to the program:

- You have a history of abusing alcohol, marijuana, cocaine, PCP, or heroin;
- You have at least 12 months and not more than 36 months left of your sentence at the time you are admitted to the program;
- You are willing to waive parole until after you complete the program;
- You do not have any charges pending that could influence the length of your sentence or the facility where you are housed;
- You have applied to the program voluntarily, without coercion from outside sources

such as correctional officer, the courts, or family members because a person must be ready for treatment and cannot be forced into recovery;

- You demonstrate a willingness to change your behavior through participation in other programs. If you have several disciplinary reports and refuse to participate in programs, your chances of entering the treatment program are substantially reduced; and

- You are willing to complete all three phases of the treatment program and abide by the program rules.

Description of the Program

The Intensive Substance Abuse Program at CTF has three phases. The first phase involves residential treatment, and consists of individual therapy and participation in support groups. The support groups are designed to help participants: (1) develop a support system; (2) enhance skills to counteract potential relapses; (3) establish an identity independent of alcohol and other drugs; and (4) develop self-esteem, self-respect, and motivation to remain sober. When the second phase begins (the "Pre-Release" phase), participants are transferred to a halfway house called Community Corrections Center 2 for the last six months prior to their parole eligibility or discharge date. (See Chapter X, "Halfway Houses.") This phase is designed to help prisoners adjust to the challenges of living in the community, obtain employment, and stay clean and sober. The third phase begins once participants are released to the community. This aftercare phase lasts one year, and involves individual therapy, parent/child support groups, peer support groups, and ongoing life skills training.

Six-Month Treatment Program (CTF)

CTF offers a second, but less intense, residential treatment program for women. While this program offers many of the same services as the 18-month program, it lasts for only 6 months and does not offer the full range of services provided by the longer program. Women in the six-month program are also housed on a separate unit, and return to the general prison population when they complete the program. Unlike the more intense program, women are not sent to Community Corrections Center 2 upon their release.

If you wish to participate in one of the drug treatment programs at CTF, talk to your case worker about which program is right for you. Generally, the 18-month program is more appropriate for women with a longer, more severe history of alcohol or other drug use. Women who are serving shorter sentences or who are near the end of their sentence may only be eligible for the six-month program.

Thirty-Day Program (Annex)

The thirty-day program at the Annex is designed to educate prisoners about addiction. Participants attend daily support group meetings where they learn about the signs of addiction, behavior management, and resources available in the community. Although a six-month drug treatment program was offered at the Annex, it was eliminated January 1, 1995, due to budget cuts. It is also not clear how long the thirty-day program will be offered.

TREATMENT IN THE COMMUNITY

There are many treatment programs in the DC area. Some of them allow women to bring their children. Many of these programs are either free, accept Medicaid, or will accept as much as

the participant can afford. Several have long waiting lists so it is a good idea to get your name on a waiting list as early as possible. The chart provided in Chapter XXII, "Drug Treatment Resources," describes many of the treatment centers in the DC area that accept women. This is not a complete list, but is only a beginning. To avoid being overwhelmed by the chart, begin by thinking about your own situation and what you will need when you leave prison. You should consider the following questions when reviewing the programs:

- What type of treatment is provided (residential or outpatient)?
- Does the program provide child care or counseling for children?
- What is the cost of the program?
- Is the program accessible by public transportation?
- Is the program for women only or is it co-ed? (Women often do better in treatment programs for women only.)
- Does the program provide additional services such as job training or linkages to education?

For example, if you need child care, look for programs that allow you to bring your children and provide care for them while you are in treatment. There are a few residential programs in the DC area where women can live with their children. Location is also important. You may either want to return to your old neighborhood or start over some place new. Finally, the type of treatment is very important. Think about the challenges you will face when you leave prison and the resources you will need to stay clean and sober. Make a list of your needs. Consider these issues as you look for a program. Remember that programs are changing every day especially because of both DC government and federal funding cuts. If you call a program and they have closed or moved, call another one on the list. Do not get discouraged if you have difficulty obtaining information about a particular program, or if you do not qualify for the program of your choice. Keep trying until you are admitted to a program which suits your needs.

In addition to the programs listed on the chart, twelve-step programs provide free and ongoing support. There are hundreds of N.A. and A.A. meetings each week in the Washington, DC area. There are also N.A. and A.A. clubs where meetings are held all day and evening. The local numbers for twelve-step programs are:

Alcoholics Anonymous (A.A.)
(202) 966-9783

Narcotics Anonymous (N.A.)
(202) 339-5316

Cocaine Anonymous (C.A.)
(301) 493-4100

AlAnon (for families and friends)
(202) 882-1334

Two other important resources are:

- **The Addiction Prevention and Recovery Administration (APRA).** APRA oversees all of the public programs in the District. The APRA number is (202) 727-5163.
- **The Washington Area Council on Alcohol and Drug Abuse (WACADA).** WACADA provides free information and referrals for individuals with drug and alcohol problems. WACADA runs a hotline where you can call and get information about treatment services in the greater Washington, DC area. The WACADA number is (202) 526-0975.

CONCLUSION

Getting and staying clean and sober is an enormous challenge, but it is one that women do not have to face alone. There are hundreds of thousands of women across the country who are clean and sober today. They are working, raising their children, having and sustaining healthy relationships, and most importantly, taking care of themselves. Anne's experience was difficult but well worth it. Today, Anne is out of prison, clean, and helping other women in recovery. She is working, in a loving relationship, and becoming the woman she always wanted to be.

"In the very beginning, it was hard for me to reach out to people. Even though I'm an extroverted person, it was hard. I just kept believing it would work out. I had to make a decision to be honest with myself. I stepped out there on faith and tried not to think about what other people would think. I started thinking — I need to talk about this stuff. The easiest thing an addict can do is just give herself a chance."

Anne P.

RESOURCES

National Women's Law Center
Women in Prison Project
11 Dupont Circle, NW
Suite 800
Washington, DC 20036
(202) 588-5180

Legal Action Center
236 Massachusetts Avenue, NE
Suite 510
Washington, DC 20002
(202) 544-5478
Attn: Susan Galbraith

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National Women's Law Center

QUESTIONS ABOUT ALCOHOL USE

- ❑ Do you drink when you feel depressed, hoping that it will make you feel better?
- ❑ Do you regularly use alcohol as medicine – to relieve menstrual cramps, help you sleep, calm your nerves?
- ❑ Do you talk a lot about drinking?
- ❑ Do you feel sociable only when you drink?
- ❑ Do you drink when you are under pressure or after an argument?
- ❑ Do you hide the empty bottles and dispose of them secretly?
- ❑ Do you buy liquor at different places so no one will know how much you purchase?
- ❑ Do you plan in advance to reward yourself with several drinks after you've worked hard in the house or on the job?
- ❑ Do you have blackouts – periods about which you remember nothing?
- ❑ Do you wonder if anyone knows how much you drink?
- ❑ Do you ever carry liquor in your purse?
- ❑ Do you worry about hurting your child when you have been drinking?
- ❑ Do you drink to make your husband less angry at you?
- ❑ If you only drink occasionally, do you have a lot of drinks at one time?
- ❑ Do you drink more when you have been emotionally or physically abused?
- ❑ Do you feel panicky when faced with non-drinking days or when you are without money to buy alcohol?
- ❑ Do you become defensive when anyone mentions your drinking?
- ❑ Do you try to cover up when you can't remember promises and feel ashamed when you misplace or lose things?
- ❑ Do you drive your car or operate machinery after you've been drinking?
- ❑ Do you take sleeping pills or tranquilizers together with alcohol?
- ❑ Do you use alcohol to have or avoid sexual activity?
- ❑ Do you think that drinks at home are OK but drinks in a bar are not?
- ❑ Have you fallen down or hurt yourself as a result of drinking?
- ❑ Are you absent or late for work more often after you drink?
- ❑ Do you suffer from indigestion, nausea, or diarrhea due to drinking?

If you've answered yes or sometimes to five of these questions, you may be developing an alcohol problem, but a yes to even fewer than five may indicate a problem. Talk with a professional in the alcohol and drug field or with a doctor who specializes in alcohol and other drug problems.

This survey was published by
The Women's Action Alliance, 370 Lexington Avenue, Suite 603, New York, NY 10017.

HOW I CAN TELL IF MY CHILD IS USING/ABUSING ALCOHOL OR OTHER DRUGS

As you answer these questions, be aware that one symptom may not necessarily signal a drug or alcohol problem. Don't be afraid to contact a professional in the alcohol or drug field if you would like to discuss symptoms or behaviors you are not sure about.

Does your child seem to be changing?
Is he/she becoming more:
- ❑ irritable
- ❑ violent
- ❑ uncooperative
- ❑ depressed

❑ Are you finding it more difficult to communicate with your child?

Does your child refuse to talk about:
- ❑ alcohol and drugs
- ❑ activities with friends

❑ Does he or she become defensive when someone talks about the negative effects of alcohol or other drugs?

Is he or she becoming less responsible about:
- ❑ doing chores
- ❑ coming home on time
- ❑ personal cleanliness

Has your child:
- ❑ been in constant need of money
- ❑ stolen money or property from family members
- ❑ dropped out of school
- ❑ insisted that the drugs or alcohol you found were someone elses
- ❑ been coming home with strange stains on his/her clothing

Has your child recently:
- ❑ adopted the style of new friends whom he/she doesn't want to talk about
- ❑ become less interested in school, sports, and other activities which used to be important
- ❑ refused to go to school
- ❑ talked of dropping out
- ❑ been coming home with alcohol on his/her breath
- ❑ been making demands to consume alcohol in the house
- ❑ hidden liquor, wine or beer containers in his/her room
- ❑ left drug paraphernalia around the house

Does your child show any of these physical symptoms:
- ❑ more sensitive to smell, touch or taste
- ❑ extra large or small pupils of the eyes
- ❑ excessive giggling
- ❑ disoriented
- ❑ red eyes
- ❑ excessive coughing
- ❑ severe headaches

Be alert to the tell-tale signs of early addiction. Changes may occur over varying periods of time, from a few months to well over a year. If you do not notice subtle changes, more blatant ones will begin to appear over time. If your child is becoming drug dependent, you may notice any one or a combination of signs. Children are often unaware that their changing behavior and attitudes are apparent. Talk with your children about alcohol and other drug use. Let your children know that you love them and that you care about how they feel and what they do.

This survey was published by
The Women's Action Alliance, 370 Lexington Avenue, Suite 603, New York, NY 10017.

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XVIII. PUBLIC BENEFITS

INTRODUCTION

Upon your release you may need some help from the government until you get back on your feet. Both the Federal government and the DC government have programs which provide income assistance, food assistance, and medical benefits to low-income people. This chapter provides basic information on these programs. For further information or assistance, contact the appropriate agency or organization listed at the end of this chapter. By telephoning or writing the proper agency you can often receive the application for most programs through the mail. This way, you can determine which programs you are eligible for and begin completing the applications before your release.

BASIC INFORMATION

- To apply for the programs listed below you must be a DC resident. However, most programs do not require a permanent address. Therefore, you may live in a shelter and still apply for these programs.

- Whenever you apply for any government benefits program you will need to supply all or some of the following documents:

  - ❑ your photo ID, driver's license, or other picture identification;

  - ❑ rent receipt or lease with landlord's name and phone number (or a letter from a shelter worker stating that you are staying there);

  - ❑ proof of DC residency (for example, a utility bill, a letter from a relative with whom you are living, or a letter from a shelter);

  - ❑ proof of income (such as pay stubs) for all adults in the household, including proof of any public benefits such as Aid to Families with Dependent Children;

  - ❑ bank statements (if any);

  - ❑ proof of expenses you will have over the next month such as rent, utilities, and medical receipts; and/or

  - ❑ proof of citizenship or immigration status.

- Some programs require additional information. This information is listed below under the heading for each program. Since these requirements change periodically, you should call each agency and check to make sure you do not need additional or different documents. It is always better to have more information with you than necessary. If you do not have the necessary information, your application process will be delayed.

- If you disagree with the government's decision regarding your eligibility for any program, you have the right to challenge the decision at a fair hearing.

INCOME ASSISTANCE

You may be eligible for one of five types of income assistance: (1) Emergency Assistance (EAS); (2) Aid to Families with Dependent Children (AFDC); (3) General Public Assistance (GPA); (4) Supplemental Security Income (SSI); and (5) Social Security. Generally, SSI and GPA are for elderly or disabled people and AFDC is for families with children. Therefore, many non-disabled, single people without children are not eligible for income assistance. The Emergency Assistance (EAS) Program provides funds to people facing a crisis, but you also need to have children living with you, or qualify as elderly, to be eligible for the program.

The benefit levels provided below were available as of January 1995. At the time this *Resource Guide* was published, however, the DC government was making large reductions in public benefits due to budget cutbacks. Moreover, the federal government was attempting to restructure many of these programs and may impose new restrictions on the receipt of benefits. The benefit levels and eligibility requirements provided below, therefore, may no longer be accurate.

Emergency Assistance (EAS)

The EAS program provides a one time cash grant to certain DC residents facing an emergency situation. Emergency situations include: (1) threatened eviction; (2) lack of security deposit and first month's rent; (3) threatened cut–off of utilities; (4) money for food; (5) essential household items; (6) burial expenses; or (7) moving expenses. For instance, you can receive a grant to purchase essential furniture when the purpose of the purchase is to reunite you with your children.

Eligibility Requirements

To be eligible for EAS you must either have dependent children, be over 60 years old, or have a spouse over 60. There is also a maximum monthly income limit as follows:

1 person	$ 785.00
2 persons	$1,052.50
3 persons	$1,320.00
4 persons	$1,587.50
5 persons	$1,855.00

The limits are higher for larger families. In addition, you must demonstrate that you have no other resources to resolve the emergency.

How to Apply

You can apply for EAS at a Department of Human Services (DHS) Service Center listed at the end of this chapter. When you apply, bring proof of the emergency along with the documents listed above. For example, if you are requesting assistance with rent, you must prove that you are threatened with eviction. You can do this by supplying legal documents such as a court summons, a Writ of Restitution, or a notice to vacate. If you need assistance with a security deposit, you must supply a letter from the landlord or an approved rental application. To request assistance with payment of a utility bill, supply a cut–off notice or letter from the utility company.

If you are eligible, you must receive the funds within 12 business days. If the emergency will occur within two business days, your application must be processed faster.

Aid to Families with Dependent Children (AFDC)

AFDC provides monthly cash assistance to families with needy children. A family qualifies for AFDC if it contains children who are in financial need and are deprived of the support of one or both parents due to death, disability, unemployment, or continued absence. Pregnant women in their last trimester may also receive AFDC if financially eligible. If your children live with a relative who financially qualifies for AFDC, the relative may receive AFDC along with the child. Eligible relatives are any blood relative or half-blood relative including grandparents, aunts, uncles, first cousins, nephews, and nieces; step-parents or step-siblings; relatives by adoption; and spouses of relatives. You can apply for AFDC at a DHS service center listed at the end of this chapter.

You should note that if your child lives with a non-relative (such as a friend), she can receive

benefits under a program very much like AFDC which is called General Assistance for Children (or "GC"). In fact, the amount paid under GC is the same as the amount paid by AFDC, and many DHS workers refer to these benefits as AFDC. You should keep in mind, however, that you can only apply for GC benefits at DHS' central office, located at 645 H Street, NE, Washington, DC ((202) 724-5188). You cannot apply for GC at any of the other service centers.

Financial Eligibility Requirements

To qualify for AFDC, you must meet **both** a **resource** test and an **income** test. First, the resource test requires that your household have financial resources under $1000. This means that if you have any money or property valued over $1,000, you are not eligible to receive AFDC. When calculating your financial resources, the following items are not included:

- the value of the house you own, as long as you and your family live in it;
- the value of your car as long as it is under $1,500;
- any television sets;
- any furniture; and
- any household appliances (such as refrigerators and microwaves).

Second, the income test requires you to have a monthly income level that is less than the amount specified for your family size. This means that you do not need to be penniless to receive AFDC, but you must meet the required income eligibility standard. Certain expenses such as child care, however, will be deducted from your income in order to determine your financial eligibility. The DC monthly income eligibility levels according to family size are as follows:

1 person	$ 265
2 persons	$ 330
3 persons	$ 420
4 persons	$ 520

If you are found to be eligible, your AFDC payments will cover the difference between your family income and the DC payment level. (You can use the same chart provided above to determine the DC payment level for your family size.) In some instances, however, not all of your income will be counted in determining your payment level. For example, certain expenses such as child care will be deducted from your income to determine your payment amount. The following is an example of how payments are calculated:

> You have three children, your family's monthly income is $200, and your monthly child care expenses are $100. After deducting child care expenses, your family income (for AFDC purposes) is $100. For a family of four (you and three children), the DC payment level is $520. Therefore, you will receive $420 per month in AFDC payments ($520 - $ 100 = $420).

Note that if you are eligible for AFDC, you are automatically entitled to Medicaid and food stamps.

Additional Requirements

To apply for AFDC, go to a DHS service center listed at the end of this chapter and fill out an application. You can also request an application over the phone or by mail, and you can return it by mail. However, the AFDC office will require an interview before determining your eligibility. After you apply, the AFDC office must make a decision within 45 days. When you apply for AFDC, bring the documents listed at the beginning of this chapter. You will also need to bring:

- a birth certificate for each child;

- Medicaid and Social Security cards for everyone in your family who has one; and

- (if there are child care expenses) a statement from your babysitter showing his/her name, address, phone number, amount paid and how often you use her/his services.

As a condition of receiving AFDC payments, you may be required to participate in an AFDC work program unless you are exempt because you attend school full-time, are ill or disabled, or provide care for an ill or disabled person or a child under age six. If you receive AFDC you can participate in "A Real Chance (ARC)," an education and employment training program which provides free child care. Ask your AFDC case worker for a referral letter for this program. ARC's phone number is (202) 727-0921.

If you are working while you receive AFDC, you are entitled to receive help in paying for child care, and you cannot be required to work without child care. For free referrals for child care, you should call: (1) the Child Day Care Services Division of the Department of Human Services at (202) 727-0284 (located at 717 14th Street, NW, Suite 700, Washington, DC 20005); or (2) the Child Care Resource and Referral Service at the Washington Child Development Council at (202) 387-0002 (located at 2121 Decatur Place, NW, Washington, DC 20008). Both of these agencies provide referrals for subsidized child care, including referrals for individuals who receive public assistance. You should also note that if you lose your AFDC benefits because your income from employment exceeds the AFDC financial eligibility level, you may still be entitled to two years of subsidized child care. If you think you qualify for this program, go to the transitional child care office located at 605 G Street, NW, Room 820, Washington, DC 20001, or call (202) 727-6929.

As a further condition of receiving AFDC payments you will also be required to help the District identify your child's absent parent, and if necessary, establish, modify, or enforce a child support order from the absent parent. This enables you to receive child support from the absent parent. You may still be able to receive AFDC even if you do not know who the other parent is or his location, as long as the agency finds that you are assisting them to the best of your ability. While you **must** cooperate with the District's Child Support Office if you receive AFDC, you should know that you can always access child support services from the Child Support Office, even if you are not receiving AFDC.

General Public Assistance (GPA)

GPA is a DC program that provides monthly cash assistance to people between 18 and 65 who are unable to work because of a permanent disability. To be eligible you must have a permanent physical or mental disability and have limited financial resources. GPA is very similar to SSI (see the following section), a federally funded program. You cannot receive both GPA and SSI. However, you should apply for both so that if an application for one program takes longer to process, you will receive a check from the other program. Usually, your GPA application will be processed faster than the SSI application. Once you get your notice of eligibility for SSI, you will no longer receive GPA payments.

To apply, go to the DHS service center at 1207 Taylor Street, NW. The telephone number is (202) 576-6507. After you apply, DHS must make a decision within 45 days. When you apply, take the documents listed at the beginning of this chapter along with:

- your birth certificate, if available;

- your Social Security card;

- verification of your previous employment and when you last worked; and

- a statement from a physician indicating your medical disability.

Supplemental Security Income (SSI)

SSI is a Federal program that provides monthly payments to the elderly, the blind and people with disabilities who have limited income and resources. To qualify, your physical or mental disability must be expected to last at least 12 months and make you unable to work. Children with disabilities can also receive SSI.

Eligibility Requirements

To qualify for SSI, you must meet **both** a **resource** test and an **income** test. Under the resource test, you must have less than $2000 in resources as an individual, or $3000 as a couple. However, your home and car are not counted as part of your resources. If only one member of a couple is eligible, the income and resources of both are considered. If a child under 18 is eligible and lives with parents, the parents' income and resources are considered. Under the income test, you must have a monthly income under an amount set by the federal government. If you are found to be eligible, you will receive SSI. Generally, the more income you have the less your payment checks will be. In 1994, SSI provided up to $461 per month for an eligible individual and $699 for an eligible couple.

How to Apply

You can apply in person at a Social Security office listed at the end of this chapter. You may also telephone to receive an application by mail. When you apply, take the documents listed at the beginning of this chapter and:

- your birth certificate, if available;
- your Social Security card; and
- a statement from a physician indicating your medical disability.

Social Security

Many people confuse SSI with Social Security because both are federal programs administered by the Social Security Administration and both are available to individuals who are aged, blind **or** disabled. These programs are not the same. Social Security is only available to those persons (and their families) who have held jobs in the past and "paid into" the Social Security system through payroll taxes. Whether you receive Social Security benefits and how much you receive depend on a number of factors, including your age and how long you were employed or your relationship to the worker. To determine whether you qualify for Social Security benefits, contact one of the Social Security offices listed at the end of this chapter.

Assuming you have qualified for Social Security benefits or are a member of a family of an individual who has qualified for benefits, there are three major types of Social Security benefits: (1) retirement benefits; (2) disability benefits; and (3) survivor's benefits. In each of these categories, children of qualified workers and parents caring for children of qualified workers may also be entitled to benefits.

Social Security Retirement Benefits

Individuals who are at least age 62 and qualify for benefits as workers are entitled to Social Security benefits upon retirement. In addition, individuals who are at least age 62 and married to qualified workers are entitled to benefits when their spouse retires. Divorced individuals who were married at least ten years and are at least age 62 are entitled to spouses' benefits even if their former spouse has not retired, so long as they have been divorced for two years or more. In all cases, ben-

efits claimed at age 62 are lower than they would be if they were first claimed at age 65 or older.

Social Security Disability Benefits (SSDI)

Qualified workers who pass a disability test and satisfy a "recency of work" rule are entitled to Social Security disability benefits. Surviving spouses and divorced surviving spouses of qualified workers, if they pass a stricter disability test, are eligible for disability benefits at age 50. Benefits claimed at age 50 are lower than they would be if they were first claimed at age 65 or older.

Social Security Survivor's Benefits

Individuals who are surviving spouses or divorced surviving spouses of qualified workers are entitled to Social Security Survivor's Benefits at age 60 (or, as described above, at age 50 if they are disabled). Benefits claimed before age 65 are lower than they would be if they were first claimed at age 65 or older.

Social Security Children's and Child-In-Care Benefits

Unmarried children under age 18 (or 19 if attending high school full-time) are eligible for benefits based on the retirement, disability or death of a qualified worker. Children disabled before age 22 while unmarried and who continue to be disabled at the time of the worker's retirement, disability or death are entitled to benefits. In addition, the surviving spouse or divorced surviving spouse of a worker (or the spouse or divorced spouse of a retired or disabled worker) is entitled to receive "child-in-care" benefits if she is caring for an unmarried child under age 16 (or a child disabled before age 22 while unmarried).

How to Apply

To apply for Survivor's Benefits, go to one of the Social Security offices listed at the end of this chapter and bring the following:

- social security number of the applicant;
- social security number of the deceased worker;
- proof of the applicant's age;
- proof of marriage, if applying for widow's or widower's benefits;
- proof of worker's death;
- children's birth certificates if they are applying; and
- deceased worker's W–2 forms for the most recent tax year.

FOOD ASSISTANCE

Food stamps and the **Women, Infants, and Children Program (WIC)** are the two principle sources of food assistance. Both programs provide coupons for purchasing food. Eligibility for food stamps is based on family size and income. You do not need to have children to receive food stamps. WIC, however, provides assistance only to pregnant women, new mothers and children under five. WIC also provides nutrition education and health services such as pediatric care, and prenatal and postpartum exams. A third party who cares for your children can also obtain WIC benefits by providing the WIC agency with a document (such as a notarized statement) certifying that s/he has temporary custody of the children.

Food Stamps

Food stamps are coupons that can be used like cash to buy food at stores. You can only buy food with food stamps. You cannot buy alcohol, tobacco, pet food or goods such as soap or paper products. All eligible people have a right to food stamps regardless of parental status, age, or having a permanent address.

Eligibility Requirements

Any DC resident who meets the income requirement and is a United States citizen or a legally admitted alien is eligible for food stamps. Unlike most other benefit programs, you do not have to have children or be elderly or disabled to receive food stamps. Your income level is the only criteria for receiving food stamps. However, you cannot receive food stamps if you are under the jurisdiction of the DC Department of Corrections (this includes halfway houses).

Although you must have a low income, you do not have to be penniless to get food stamps. You can have a job and still get food stamps if your job does not pay enough to bring you up to minimum standards. The amount of income a household can have and still qualify for food stamps varies according to size. SSI and AFDC recipients are almost always eligible for food stamps. Households are allowed to subtract certain costs, such as child care costs, from their gross (total) income in order to determine their net income which is used to determine eligibility for food stamps. The income eligibility and benefit levels for 1994 were:

Number in Household	Monthly Gross (before taxes and deductions) Income	Maximum Benefits
1	$ 798	$ 115
2	1,066	212
3	1,335	304
4	1,604	386
5	1,872	459

How to Apply

To apply for food stamps, request an application over the phone, by mail, or in person at a DHS Service Center. After you turn in an application, the food stamp office will schedule an interview.

At the interview, you will need to provide the documents listed at the beginning of this chapter along with the following:

- Social Security cards for all household members;
- proof of any income deductions you may claim such as child care, invalid care, or tuition; and
- proof of excessive medical and dental expenses for persons over 60, or persons receiving SSI benefits or Social Security Disability payments.

If you are unable to get the required documents, DHS is required to telephone or accept letters from people who can verify the necessary information. For example, if you cannot get an ID card because you do not have any money, DHS is required to accept an alternate form of ID such as a letter from your social worker or case worker verifying your identity. Be sure to include the telephone number of the person who wrote the letter in case the DHS worker wants to confirm its authenticity.

"Expedited Food Stamps"

By law, you must receive your food stamps within 30 days of filing your application. In certain situations, however, you are entitled to receive "expedited food stamps" within 5 days of filing your application. ("Expedited" means the process is sped up). You are entitled to "expedited food stamps" if you can prove you:

- are homeless;

[You do not have to be without a place to stay in order to be considered homeless. You are considered homeless if you do not have a permanent residence. For example, if you sleep at a shelter

or at a friend's house, you are homeless for the purpose of receiving food stamps.]

- have less than $100 in cash resources and less than $150 in gross (before taxes) monthly income; or
- your gross income plus any other cash resources are less than your monthly rent plus utilities.

The DHS case worker should inform you at the initial interview whether you are approved for expedited food stamps and when your ATP (Authorization to Participate) card will be ready. You can also call the Food Stamp Hotline at (202) 727–0855 to find out when your ATP card will be available. If you have any problems obtaining food stamps, contact the Washington Legal Clinic for the Homeless, 1800 Massachusetts Avenue, NW, Washington, DC, (202) 872-1494.

Women, Infants, & Children Program (WIC)

The WIC program provides coupons which can be used at Safeway, Giant, or other participating supermarkets for milk, cheese, cereal, peanut butter, juices, and infant formula. Low–income pregnant women, new mothers, and children under 5 may be eligible for WIC. You can obtain emergency supplies of milk and formula for a baby by calling the BABY Hotline at (202) 547–BABY. Pregnant women, new mothers, and children under six years old who are not eligible for WIC can obtain food directly through the Commodity Supplemental Food Program. The Commodity Supplemental Food Program's central office is located at 613 G Street, NW, Suite 623, Washington, DC. Their phone number is (202) 727–2421. This program is only for those who are not eligible for WIC. You cannot receive both WIC and Supplemental Food.

Eligibility Requirements

If you receive AFDC, food stamps, or Medicaid you automatically meet the income eligibility requirements for WIC. In addition, families with incomes up to 185% of the federal poverty income level are eligible. For a family of four, this means you can have no more than $24,790. The federal poverty income guidelines change every year. Therefore, you should check with the clinic where you apply. Relatives or nonrelatives applying for benefits for children of whom they have informal custody do not have to report their income when applying only for the children. You may receive WIC benefits if you live in a shelter or transitional residence that does not provide you with any meals. There may be a waiting list for WIC. However, pregnant women and infants at nutritional risk are given priority. The workers at WIC service sites will determine if you or your children are at nutritional risk.

How to Apply

To apply for WIC benefits, call (202) 727–1658 to make an appointment and find out the location of the WIC service sites and the length of the waiting list at each clinic. There is usually a four to eight week waiting period before you will be seen. When you call to make an appointment, you will be pre–screened for income eligibility over the telephone. If you are told by the Hotline operator that you do not qualify financially, try one of the other clinics.

If you are applying for a child, bring the child to the appointment. Also bring the following documentation (you may not need all the documentation listed at the beginning of this chapter):

- proof of participation in the food stamp, Medicaid, or AFDC program or proof of income;

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- birth certificates for your children;
- proof of residency (such as a lease or utility bill). If you live in a shelter, bring a letter stating that you live there, whether they supply you with any meals, and whether they have a refrigerator you can use; and
- if applicable, a letter from a medical professional documenting risk factors, including pregnancy, anemia, or underweight or overweight children.

At the appointment you will fill out an application and be interviewed. They will also do a blood test and measure height and weight for you and the children to determine whether you are at nutritional risk. If they determine that you are at nutritional risk and you have brought all the necessary documents with you, you will receive your first month's food vouchers that same day.

MEDICAL ASSISTANCE

The Medical Assistance program helps pay medical costs for low-income people. The program consists of the federal Medicaid program and the DC Medical Charities program. Medical Charities covers some people who are not eligible for Medicaid. When you apply for Medical Assistance you will be considered for both programs. Eligibility is based on income, taking into account some expenses such as child care and medical expenses.

You can apply for Medical Assistance at a DHS Service Center listed at the end of this chapter. For general information call (202) 724-5173. You may also request an application by phone and return it by mail. However, DHS will require a personal interview before deciding whether you are eligible. When applying for Medical Assistance you should bring the documents listed at the beginning of the chapter and the following documents:

- identification for each family member requesting assistance;
- two statements of neighbors or friends or one letter from an advocacy agency stating that children are living in the household (if applicable); and
- bills or receipts for health insurance premiums, medical services, and prescriptions, including verification of pregnancy or any special medical needs.

The Department of Human Services must make a decision within 45 days except in special circumstances involving a disability. Even if you are denied Medicaid or Medical Charities, you can go to any hospital for a medical emergency. Almost all hospitals are prohibited from turning away a person with an emergency medical condition.

Medicaid

Under Medicaid you may receive services from D.C. General Hospital, all Department of Human Services medical facilities, and from any physician, pharmacy, or hospital that accepts Medicaid patients.

You are automatically eligible for Medicaid if you receive AFDC (Aid to Families with Dependent Children), SSI (Supplemental Security Income) or GPA (General Public Assistance). If you have a limited income, you may also be eligible if you have dependent children, if you are over 65 or under 21 years old, if you are blind or permanently disabled.

Medical Charities

Under the Medical Charities program, you may receive services from D.C. General Hospital and

all Department of Human Services medical facilities. If you are unable to afford health care but are not eligible for Medicaid, you will automatically be considered for Medical Charities when you apply for Medical Assistance.

Eyeglasses

D.C. General Hospital and Washington Hospital Center can provide an eyeglass prescription for people who receive Medical Assistance. If you do not receive Medical Assistance, you can get a prescription at a monthly clinic conducted by the Society for the Prevention of Blindness, 1775 Church Street, NW (between 17th and 18th, P and Q). Call (202) 234–1010 to find out the next date the clinic is operating. The normal donation is $15, but this can be waived based on need.

IMPORTANT ADDRESSES AND PHONE NUMBERS

DHS Service Centers in DC

[For Emergency Assistance (EAS), Aid to Families with Dependent Children (AFDC), Food Stamps, and Medical Assistance Programs]

H Street Services Center
645 H Street, NE
Washington, DC
(202) 724–3886

Congress Heights Services Center
940 Valley Avenue, SE
Washington, DC
(202) 645–4548

Anacostia Services Center
2100 Martin Luther King, Jr. Avenue, SE
Washington, DC
(202) 645–4608

Northeast Services Center
4313 Nannie H. Burroughs Avenue, NE
Washington, DC
(202) 727–0338

Capitol View Services Center
5929 East Capitol Street, SE
Washington, DC
(202) 767–7360

Capitol East Services Center
433 Ninth Street, NE
Washington, DC
(202) 727–0611

Kennedy Street Services Center
508 Kennedy Street, NW
Washington, DC
(202) 576–7313

Edgewood Services Center
601 Edgewood Terrace, NE
Washington, DC
(202) 576–6625

Hillcrest Services Center
2818 Alabama Avenue, SE
Washington, DC
(202) 645–4649

Eckington Services Center
60 Florida Avenue, NE
Washington, DC
(202) 673–7774

For Assistance Establishing Paternity & Obtaining Child Support

DC Office of Paternity and Child Support Enforcement
613 G St, NW
Washington, DC 20001
(202) 724-8800

For General Public Assistance

1207 Taylor Street, NW
Washington, DC
(202) 576–6507

For SSI, SSDI and Survivor's Benefits

2100 M Street, NW
Washington, DC 20203
(202) 653–6945

333 Hawaii Avenue, NE
Washington, DC 20011
(202) 376–3640

3005 Bladensburg Road, NE
Washington, DC 20018
(202) 376–3100

71 Yost Place
Seat Pleasant, MD 20743
(800) 772-1213

3244 Pennsylvania Avenue, SE
Washington, DC 20020
(800) 772-1213

6400 Old Branch Avenue
Temple Hills, MD 20748
(800) 772-1213

63 Wheaton Plaza
Wheaton, MD 20902
(800) 772-1213

WIC SITES IN THE DISTRICT OF COLUMBIA

Northwest

Children's Hospital
Comprehensive Care Clinic
2220 11th Street, NW
Phone: (202) 745–5598
Hours: M–F
8:30 a.m. – 4:00 p.m.

Morgan Clinic
2250 Champlain Street, NW
Phone: (202) 745–5585
Hours: M–F
8:30 a.m. – 4:30 p.m.

Columbia Hospital for Women
2425 L Street, NW
Phone: (202) 293–6020
Hours: M–F
8:00 a.m. – 3:00 p.m.
Bilingual Service Center
1808 Adams Mill Road, NW
Phone: (202) 332–7459
Hours
Certification
W, Th, F 9:00 a.m. – 3:30 p.m.
Voucher pick–up: W, Th, F
1:30 p.m. – 3:30 p.m.

Upper Cardozo Clinic
3020 14th Street, NW
Phone: (202) 745–4336
Hours:
Certification
M, T, Th, F 9:30 a.m. – 12:30 p.m.
W 12:00 p.m. – 6:00 p.m.
Voucher pick–up
M, T, Th 2:00 p.m. – 4:30 p.m.
W 12:00 p.m. – 6:00 p.m.

ORGANIZATIONS TO CONTACT FOR FURTHER ASSISTANCE

Washington Legal Clinic for the Homeless
1800 Massachusetts Avenue, NW
6th Floor
Washington, DC 20036
(202) 872–1494

Catholic Archdiocese Legal Network
1438 Rhode Island Ave., NE
Washington, DC 20018
(202) 526–4100

D.C. School of Law Entitlement Clinic
719 13th Street, NW
Washington, DC 20005
(202) 727–9602

Legal Aid Society
666 11th Street, NW
Room 300
Washington, DC 20001
(202) 628–1161

Neighborhood Legal Services Program
Anacostia – **(202) 678–2000**
Court Area Branch – **(202) 289–5200**
Family Branch – **(202) 682–2705**
Mt. Pleasant Branch – **(202) 726–1400**
1337 H Street – **(202) 399–6431**

University Legal Services
300 Eye Street, NE
Washington, DC 20002
(202) 547–4747

XIX. HOUSING

INTRODUCTION

Some people are fortunate to have a home to return to upon their release from prison. Many, however, do not, and most prisoners do not think about making arrangements for housing until shortly before their release date. This is a big mistake because many housing programs have an application process followed by a long wait for housing. You should read through this chapter and start making arrangements to meet your housing needs at least 3 to 6 months prior to your release date.

Housing is very important and should be a top priority in your pre–release plans. Obviously, it puts a roof over your head and gives you a place to rest. Also, if your children are in foster care or with other caregivers, you will need adequate and appropriate housing in order to reunite with them. In addition, it provides you with a safe place where you can focus on yourself, continue recovery and become more self–sufficient.

Several different types of housing are available for people with low– to no–income:
(1) Emergency Shelter; (2) Quasi–Emergency Shelter; (3) Transitional Shelter; and
(4) Transitional Housing. There are also government–run and funded housing programs such as public housing, Section 8 certificate housing, and the Tenant's Assistance Program (TAP). These options are discussed in the following pages. A list of shelters and other housing programs is provided at the end of the chapter.

EMERGENCY SHELTERS

Emergency shelters are managed and operated by government agencies, churches, and private non–profit organizations. Emergency shelters for single persons usually open in the evening (around 6 or 7 pm) and close in the morning (around 7 or 8 am). Beds are usually assigned on a first come, first served basis. Since these shelters are not open 24 hours a day, you must leave when the shelter closes. Additionally, you cannot store your belongings at most of these shelters. Some shelters may provide one meal a day (usually breakfast), a place to shower, and facilities to wash your clothes. Some emergency shelters have day programs on site or are affiliated with other day programs. These day programs usually consist of workshops or counseling to assist you with finding permanent housing, drug treatment, or employment. They also provide a warm place to stay during the day, and sometimes food and some structured activities. However, most do not require that you participate in these activities in order to receive the other services provided by the shelter.

How to Obtain Emergency Shelter

If you are a single person, go directly to the shelter and line up to get a bed for that night. To ensure that you get a bed, you should line up an hour or so before the shelter is scheduled to open. In cold or wet weather, the beds fill up quickly. If they do not have a bed available for you, some shelters will make calls to find another shelter that can accommodate you and provide you with transportation. On freezing nights, additional shelters open for anyone in need (call (800) 535-7275). Some emergency shelters will guarantee a bed for you once you have stayed there for one night and most give preference to those who have been there the previous night. However, you must come back and sign in the next night. You can stay at most emergency shelters for as long as necessary if you return to that shelter and renew your request each night.

If you have children or other family members with you, you should request emergency shelter at the Department of Human Services, Family Intake Office at 25 M Street, SW. You must bring paperwork such as an eviction notice or a statement from someone (such as a social worker) saying that you and your family need shelter. If eligible, you will be placed on a waiting list and will be required to contact DHS regularly. During the winter, a few family emergency shelters are managed and operated by private, non–profit organizations and churches. You should contact these shelters directly to get more information.

Benefits of Emergency Shelter

Emergency shelters do not appeal to most people. They have a reputation for being dirty or unsafe, and many people resent not being able to treat the shelter like home, i.e. leaving belongings, getting phone calls, having visitors. They are not home, but they are safer than sleeping in the streets. In addition, once you are in the shelter system, the staff will help you to find transitional or permanent housing. For example, a case worker at an emergency shelter can refer you to a transitional shelter. Then, a counselor at a transitional shelter can refer you to a transitional housing program. Also, transitional housing programs often require you to be drug free for a certain amount of time. Going through the shelter system provides you with an opportunity to detox, get help and accumulate the "clean time" you need to get into the longer programs. Another benefit of going through the shelter system is that you may be placed on the priority list for getting public housing or Section 8 certificates.

QUASI–EMERGENCY SHELTERS

A quasi–emergency shelter is a little different from an emergency shelter in that you do not have to renew your request for a bed every night and there is an application process. Private non–profit organizations or churches operate these shelters, which only operate during the evening hours. However, you can keep your belongings at these shelters, and they usually have day programs. These shelters also require you to follow a structured program. For example, they have curfews and routine drug/alcohol testing on site. In fact, most of these shelters require you to be drug free before entering their program and will evict you if you use drugs or alcohol. These shelters have social workers or counselors who will work with you to get your GED, obtain vocational training, job placement, drug treatment, or permanent housing. They also provide at least one meal a day, clothes, and bus tokens.

You must go through an intake process before you can be accepted into a quasi–emergency shelter. The intake process consists of an interview with a counselor, and you usually need a referral to get that initial interview. You can be referred by a social worker, case worker, probation officer, attorney, or counselor. Each quasi–emergency shelter has a different intake process, and the length of stay at each shelter differs as well.

TRANSITIONAL SHELTERS

Transitional shelters are open 24 hours a day and are designed to be a safe living space for single individuals trying to move from homelessness into permanent housing. Your stay at a transitional shelter can range from 3 months to a year. During your stay you are required to abide by the rules of the "house." Transitional shelters are usually operated by private, non-profit organizations or churches, and they vary in size. Most transitional shelters are geared to assist with and promote drug recovery and therefore require you to attend daily Narcotics Anonymous (NA) meetings and will evict you for using drugs or alcohol. Some transitional shelters will not accept you into their "house" unless you have been through a drug treatment program or have abstained from drugs for at least 30 days.

How to Obtain Transitional Shelter

To get into a transitional shelter program, you need a referral from someone that knows you well such as a social worker, a case worker, or an attorney. Once the shelter receives the referral, they will set up an interview with you. If that interview goes well, they will accept you into the program. If space is available, you will be admitted right away. Most likely, you will be placed on a waiting list for the next available bed. Some transitional shelters will interview incarcerated women prior to their release. For example, case workers from Hannah House and New Endeavors by Women have interviewed women at the Lorton Minimum Security Annex and at the Correctional Treatment Facility.

Restrictions and Benefits

Transitional shelters offer you stability while you are getting your life together. However, it takes commitment and hard work to make it through the programs. For example, most transitional shelters have curfews of 10 pm every week night, and 11 pm every weekend night. Some shelters require you to be in as early as 7 pm. Also, you cannot receive visitors in the house, you must save a certain portion of your income, and you must take random drug/alcohol tests and attend house meetings and workshops. However, along with the rules and structured programs, transitional shelters offer supportive services. There are usually one or two counselors on staff to help you with housing, employment, and recovery. Also, they usually provide you with bus tokens, meals, clothing, and counseling. It is usually a safe, drug–free space to call home for the short term.

TRANSITIONAL HOUSING

Transitional housing programs are very similar to public housing programs in that they provide housing to low-income and homeless families. Each program has different eligibility requirements, but generally you must be a DC resident, have a source of income, and have children that will be living with you. In addition, you must be drug free for a specified period of time. Often, these programs require 6 to 12 months of "clean" time.

Transitional housing units are generally apartments or houses which are owned and managed by private non–profit organizations such as ConServe and ARCH. When you apply, these organizations provide you with a number of housing options, and try to place you in the unit that you prefer. While these housing units may not be located in the most desirable neighborhoods in the DC area, they are generally located on safe blocks and are maintained in very good condition. Most transitional housing programs allow you to remain in the apartment units for two years. With some programs, you have the option of staying in the apartment after the first two years and renting the apartment at full market value.

To get transitional housing, you must be referred by a shelter worker, social worker, or case worker and go through a series of interviews. Once you are accepted into the program, you must pay 30% of your income as rent. For example, if you and your children receive $300 in food stamps and $300 from AFDC, your rent for the apartment will be $180 (30% of your total income of $600). Similar to transitional shelter programs, residents must abide by certain program requirements such as mandatory savings and monthly meetings with case workers.

PUBLIC HOUSING AND SECTION 8 CERTIFICATES

Public housing and Section 8 certificates allow DC residents to receive housing benefits from the DC and federal governments. The big difference between these programs is that Section 8 certificates allow you to rent privately–owned property for about 30% of your income (provided that the landlord accepts Section 8 certificates), while under the public housing program you receive a government–owned housing unit.

Eligibility Requirements

Both programs have basically the same eligibility requirements. If you apply, you should know that the government requires that most public housing and Section 8 certificates go toward "very low income" families. Therefore, if you are "low income" and you apply for public housing, you may or may not receive housing, depending on how many units are available for "low income" families.

The following people are eligible for public housing and Section 8 certificates:

- families that live or work in DC and are considered to be "very low income" or "low income." Refer to the following chart to determine if you are classified as "low income" or "very low income":

LOW INCOME	
Number of Family Members	**Yearly Income**
1	$27,950
2	$31,900
3	$35,900
4	$39,900
5	$43,100
6	$46,300
7	$49,500
8	$52,650

VERY LOW INCOME	
Number of Family Members	**Yearly Income**
1	$21,950
2	$25,100
3	$28,200
4	$31,350
5	$33,850
6	$36,350
7	$38,850
8	$41,400

- individuals over 62 years old;
- individuals who cannot engage in any substantial, gainful activity because of a short-term (at least a year) physical or mental impairment that can be medically documented;
- individuals who have a long-term (indefinite duration) physical or mental impairment and cannot live independently because of it; or
- individuals who are displaced from their homes by government action or federally recognized disasters such as hurricanes or floods.

Application Process

You can apply for public housing or a Section 8 certificate by registering in person or by mail at the DC Department of Public and Assisted Housing (DPAH), 1133 North Capitol Street, NE, Washington, DC 20002. You should bring with you: (1) social security cards and birth certificates for everyone in your household; and (2) proof of income and special status (such as medical documentation of your disability). It is essential that you update your registration each year within 30 days after your birthdate, and report any changes in your registration information in person to DPAH Client Services ((202) 535–1706). If you do not update your registration or report these changes, your application will be withdrawn from the waiting list.

Once you submit your application, you are placed on a waiting list based on your application date. Due to a lack of resources, an overwhelming demand for housing, slow construction of new units, and slow rehabilitation of old housing, the waiting lists for public housing and Section 8 certificates are extremely long — in fact, you may be facing a 5 to 8 year wait. Although it is extremely difficult to get public housiag and Section 8 certificates, you should apply for both public housing and Section 8 certificates anyway. It never hurts to apply, and you may be placed on the priority or preference list. For example, elderly or disabled people generally receive priority on the waiting list. Additionally, if you are homeless, live in shelters, or do not have a regular nighttime residence, you will be placed on the priority list so long as you have children and plan to reunite with them upon obtaining housing. Being placed on the priority list may allow you to receive public housing or a Section 8 certificate in one year rather than 5 to 8 years.

TENANT ASSISTANCE PROGRAMS (TAP)

This program is administered very much like the Section 8 housing program. The only difference is that TAP is funded by the DC government for low-income DC residents. This program allows you to only pay 30% of your income as rent and the DC government pays the rest of your rent. This program was suspended in December 1988 due to lack of funds. It is not clear whether this program will reopen. You should, however, apply for it anyway.

RESOURCES

The **"Emergency Food and Shelter Directory"** is distributed free of charge by the Interfaith Conference. You can pick one up in person at 1419 V Street, NW, Washington, DC 20009, or you can send a self-addressed envelope with 75 cents postage, and one will be mailed to you. In addition, the **Washington Legal Clinic for the Homeless** provides legal advocacy services to individuals with housing problems. They are located at 1800 Massachusetts Avenue, NW, 6th Floor, Washington, DC 20036, **(202) 872-1464**.

HOUSING RESOURCES
WASHINGTON, DC

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	POPULATION SERVED	REFERRAL PROCESS	SERVICES PROVIDED	NO. OF BEDS	LENGTH OF STAY
Calvary Shelter 928 5th St., NW Washington, DC 20001 (202) 783-6651 8:00 p.m. to 8:00 a.m. Larry Graham	- Single women/no children - At least 18 years of age - Accepts chronically mentally ill	- Walk-in	- Some meals - Psychiatrist on site - Case management - NA/AA meetings - Life skills program	25	No limit
ConServe 1012 14th St., NW Suite 1400 Washington, DC 20005 (202) 639-9760 9:00 a.m. to 5:00 p.m. Anna Marie Basile or other staff	- Homeless families with at least one child under 18	- Referral required from Social Worker of person familiar with client's history - Extensive interview process	- Case management - Financial planning - Referrals for medical care and other services - Employment counseling - Computer training program available - Rent: client responsible for 30% of rent	54 apts. located throughout the city	Two years
Crummel School Shelter Kendall and Oakie St., NW Washington, DC 20001 (202) 269-4668 7:00 p.m. to 7:00 a.m. Kenneth Watkins	- Single women/no children - At least 18 years of age	- Walk-in - Intake starts at 6pm	- Soup and sandwiches - Emergency clothing - AA/NA meetings - Dental and medical clinics	36	No limit

HOUSING RESOURCES
WASHINGTON, DC

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	POPULATION SERVED	REFERRAL PROCESS	SERVICES PROVIDED	NO. OF BEDS	LENGTH OF STAY
Federal City Shelter Community for Creative Non-Violence 425 2nd St., NW Washington, DC 20001 (202) 393-1909 24 hours Lois Mitchell	- Single women/no children - At least 18 years of age	- Walk-in - First come/first serve	- Evening meals - Emergency clothing - Substance abuse counseling - Employment counseling - Psychiatrist available - Medical and dental clinics	150	One year
Hannah House 612 M St., NW Washington, DC 20001 (202) 289-4840 24 hours Nancy Winn	- Single women/no children - At least 21 years of age - Preference given to DC residents (Hannah House will be opening another facility for women with children in November 1995)	- Referral required from House of Ruth, Mt. Carmel, Calvary Shelter, lawyers, parole or probation officers - Will interview at DC correctional facilities	- Meals - Some transportation - Program for substance abuse - NA/AA meetings	15	6 mos.
House of Imagene 214 P St., NW Washington, DC 20001 (202) 797-7460 24 hours Reverend Smith	- Single mother with children - At least 18 years of age	- Referral required from a social service agency	- Advocacy for battered women - Permanent housing search assistance - Residents required to leave facility from 9 a.m. until 4:30 a.m.	8	6 weeks

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HOUSING RESOURCES
WASHINGTON, DC

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	POPULATION SERVED	REFERRAL PROCESS	SERVICES PROVIDED	NO. OF BEDS	LENGTH OF STAY
House of Ruth - Herspace Washington, DC (202) 371-0088/Office (202) 347-2777/Hotline 24 hours	- Battered women and their children - No boys over the age of 12	- Client must call ahead to determine availability	- Meals - Emergency clothing - Medical and dental clinic - Tutorial program - Full time social workers and case managers	6	60 days
House of Ruth - Madison 651 10th St., NE Washington, DC 20002 (202) 547-2600 4:30 p.m. to 8:30 a.m. Sharon Winget	- Single women/no children or pregnant women with no other children - At least 18 years of age - Must be DC resident	- Client must call ahead to determine availability	- Meals - Emergency clothing - Emergency transportation - Health clinic - NA/AA meetings - Full time psychiatrists	84	Determined by case manager
House of Ruth - The Mothers Program 700 6th St., NE Washington, DC 20002 (202) 544-1134 24 hours Wanda Smith Gerber	- Pregnant women or women with infants - At least 18 years of age	- Requires referral from Odessa After Care Residential Treatment Program	- Substance abuse counseling - Employment & financial counseling - Referrals made to dental and medical clinics	10	Variable

HOUSING RESOURCES
WASHINGTON, DC

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	POPULATION SERVED	REFERRAL PROCESS	SERVICES PROVIDED	NO. OF BEDS	LENGTH OF STAY
House of Ruth - Unity Inn Transition Program 459 Massachusetts Ave., NW Washington, DC 20001 (202) 408-7778 24 hours Gerrilyn Ball	- Single women/no children - At least 18 years of age - Applicant must have a source of income or be receiving public assistance	- Requires a referral from the House of Ruth-Madison - Preliminary phone call	- Substance abuse treatment - Employment counseling and legal assistance - Medical and dental clinics	24	Up to 2 years
Jubilee Housing 1750 Columbia Rd., NW Washington, DC 20009 (202) 332-4020 9:00 a.m. to 5:00 p.m. Mon-Fri Robert Ryland	- Anyone in need of low income housing - Must be earning under $9,000 per year	- Walk-in	- Job referrals - Some day care - After school tutoring	284 units in 8 bldgs.	Indefinite
Luther Place 1226 Vermont Ave., NW Washington, DC 20005 (202) 387-5464 4:00 p.m. to 7:30 a.m. Erin Roth	- Single women/no children - At least 18 years of age	- Requires a referral from Bethany Women's Day Center	- Meals - Drug detox and rehab - Employment and housing counseling - Medical and psychological services	31	Variable

HOUSING RESOURCES
WASHINGTON, DC

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	POPULATION SERVED	REFERRAL PROCESS	SERVICES PROVIDED	NO. OF BEDS	LENGTH OF STAY
Mt. Carmel Place - Overnight Shelter 471 G Pl., NW Washington DC 20001 (202) 289-6315 7:30 p.m. to 8:30 a.m. Sister Rosa Alverez	- Single women/no children - At least 18 years of age	- Walk-in	- Some meals - Substance abuse counseling - Job placement assistance	26	Variable
My Sisters Place P.O. Box 29596 Washington, DC 20017 (202) 529-5991 24 hours Arnita Green	- Battered women with or without children - At least 18 years of age - No boys over the age of 12	- Requires a preliminary phone call to determine eligibility	- Meals - Emergency clothing - Full time advocate - Job and housing coordinators - Case management	24	2-3 months
New Endeavors by Women 611 N St., NW Washington, DC 20001 (202) 682-5825 24 hours Carey Schneider	- Single women/no children - At least 18 years of age	- Requires referral from another shelter, a social service agency or someone who knows applicant well	- Some meals - Case management - NA/AA meetings - GED tutoring - Teaches independent living skills	39	90 days

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HOUSING RESOURCES
WASHINGTON, DC

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	POPULATION SERVED	REFERRAL PROCESS	SERVICES PROVIDED	NO. OF BEDS	LENGTH OF STAY
Phyllis Wheatley YWCA 901 Rhode Island Ave., NW Washington, DC 20001 (202) 667-9100 24 hours Dr. Eula DeLeine	- Low income housing for women	- Walk-in	- Cost of $50 a week - No social services provided	40	Variable
Salvation Army - Transitional Home 1007 K St., NW Washington, DC 20001 (202) 783-4050 24 hours Ms. Lieber	- Single mothers with children - At least 18 years of age - Boys over 10 years of age not allowed	- Requires a referral from a social service agency	- Does not provide social services but will refer out	6 one bedroom apts.	One year
Victor Howell House 1304 Euclid St., NW Washington, DC 20009 (202) 387-6678 24 hours Pete Farina	- Low income housing for single clients who are either medically ill or physically challenged - Must have source of income or be receiving public assistance	- Walk-in	- Counseling - Medical care - Job referrals - Meals - Some transportation - Rent: $260/mo. single; $157/mo. double	10 spaces men and women	Unlimited as long as rent can be paid

HOUSING RESOURCES
MARYLAND

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	POPULATION SERVED	REFERRAL PROCESS	SERVICES PROVIDED	NO. OF BEDS	LENGTH OF STAY
Greentree Shelter P.O. Box 34250 Bethesda, MD 20817 (301) 365-2190 24 hours Rosemarie Downer	- Women with children - At least 18 years of age - Montgomery County residents only	- Requires referral from a social service agency with preference given to Department of Social Service referrals in Maryland	- Meals - Emergency clothing - Transportation - Legal assistance for battered women - Full time social worker - Medical clinic - GED training - After school programs and tutoring for children.	46	3-6 months
Helping Hands 622 N. Horners Lane Rockville, MD 20850 (301) 340-2796 6:30 p.m. to 7:30 a.m. Saundra Chapman-Frazier	- Single women with children - At least 18 years of age - Maryland residents only - No boys over ten years of age	- Requires referral from Department of Social Services in Maryland	- Meals - GED tutoring - Parenting - Self-esteem counseling - Case management	4 rooms for 4 families each room has 3 beds	90 days
Prince Georges County Shelters Coordinating Center 6111 Ager Rd. Hyattsville, MD 20782 (301) 779-5917/Office (301) 731-0999/Hotline	- Women with children residents of Prince Georges County only	- Call coordinating center	- Varies from shelter to shelter	Varies	Varies

HOUSING RESOURCES
MARYLAND

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	POPULATION SERVED	REFERRAL PROCESS	SERVICES PROVIDED	NO. OF BEDS	LENGTH OF STAY
Rainbow Place 215 W. Montgomery Ave. Rockville, MD 20850 (301) 762-3363 7:00 p.m. to 7:00 a.m. Marnie Lehr or Nancy Webert	- Single women/no children	- Walk-in	- Meals - Part time psychiatrist - Referrals made for social services	25	Winter shelter open from Nov. 1st-March 31st
Stepping Stones Shelter P.O. Box 712 Rockville, MD 20848-0712 24 hours (301) 251-0567 Helayne Baker	- Single women with children - Residents of Montgomery County only	- Requires referral from a social service agency or church	- Meals - Emergency clothing - Case management - Weekly drug abuse workshops - Referrals made for social services	16	90 days

HOUSING RESOURCES
VIRGINIA

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	POPULATION SERVED	REFERRAL PROCESS	SERVICES PROVIDED	NO. OF BEDS	LENGTH OF STAY
Alexandria Community Shelter 2355-B Mill Rd. Alexandria, VA 22314 (703) 329-2050 24 hours Chepi DiCalogero	- Anyone over 18 years of age - Preference given to Alexandria residents	- Referral required from social service agency	- Meals - Emergency clothing - Case management - NA/AA meetings - GED tutoring - Legal services	64-68 spaces for single women, 32 spaces for families	2 weeks, but can be extended
Arlington Community Temporary Shelter P.O. Box 1285 Arlington, VA 22210 (703) 237-1147 24 hours Patience Herren or Valerie Lassiter	- Single women or women with children - Dual parent families - Preference given to Arlington County residents	- Applicants screened by telephone	- Meals - Case management - Substance abuse counseling - Family counseling - Some transportation	16	3 weeks
Arlington Community Temporary Shelter - Safehouse P.O. Box 1285 Arlington, VA 22210 (703) 237-0881 24 hours Charmain Hendy	- Victim of domestic violence with or without children - At least 18 years of age - Preference given to Arlington County residents	- Applicants screened by telephone	- Meals - Case management - Public health nurse	11	3 weeks

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HOUSING RESOURCES
VIRGINIA

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	POPULATION SERVED	REFERRAL PROCESS	SERVICES PROVIDED	NO. OF BEDS	LENGTH OF STAY
Bethany House of Northern Virginia 5901 Leesburg Pike Falls Church, VA 22041 (703) 998-8811/Office (703) 256-3526/Hotline 24 hours Doris Ward	- Victim of domestic violence with or without children - At least 18 years of age - Must be seeking employment	- Call for appointment	- Meals - Case management - Counseling	20	4 months
Carpenter's Lodgings 413 Duke St. Alexandria, VA 22314 (703) 549-4407 24 Hours Susan Buchmueller	- Those seeking low income transitional housing	- Walk-in	- Case management - Rent subsidy provided	8 one bedroom apts. and town-house	1-2 years
Carpenter's Shelter 2012 Duke St. Alexandria, VA 22314 (703) 683-7383 24 hours Mary Martin	- Women with children - Alexandria residents only	- Walk-in or referral from local agencies	- Meals - Emergency clothing - Substance abuse treatment - Parenting workshops	130 spaces for men, women and children	3 months

HOUSING RESOURCES
VIRGINIA

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	POPULATION SERVED	REFERRAL PROCESS	SERVICES PROVIDED	NO. OF BEDS	LENGTH OF STAY
Christ House 131 S. West Alexandria, VA 22314 (703) 549-8644 24 hours Gus Hall	- Women with children - At least 18 years of age	- Walk-in	- Meals - Emergency clothing - Case management - Job training - Housing assistance	19	Indefinitely
Embry Rucker Community Shelter 11975 Bownan Towne Dr. Reston, VA 22090 (703) 437-1975 24 hours Derek Edwards	- Single women with children or pregnant women - Fairfax County residents only	- Must be referred through department of human development	- Meals - Some transportation - Medical, dental and social services - NA/AA meetings - Adult education	19	30-90 days
Office of Women - Domestic Violence Program 110 N. Royal St. Alexandria, VA 22314 (703) 838-4911 24 hours Claire Dunn	- Battered women and children	- Applicants screened by telephone	- Meals - Support groups - Anger management program for batterers	14	28 days

HOUSING RESOURCES
VIRGINIA

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	POPULATION SERVED	REFERRAL PROCESS	SERVICES PROVIDED	NO. OF BEDS	LENGTH OF STAY
Route One Corridor Housing Inc. Eleanor Kennedy Shelter 9155 Richmond Highway Ft. Belvoir, VA 22060 (703) 799-0200 24 hours Pamela Michelle	- Single women/no children - At least 18 years of age - Preference given to Fairfax County residents	- Walk-in	- Meals - Emergency clothing - Case management - NA/AA meetings - GED training	12	60 days
Sullivan House 3103 Ninth Rd. N. Arlington, VA 22201 (703) 525-7177 24 hours Mark Moreau	- Single women with or without children - Arlington County residents only	- Referral from Arlington Community Temporary Shelter or Department of Health Services	- Case management - Counseling - Life skills training	50	60 days

XIX. JOB TRAINING REFERRAL SOURCES

Whether or not you participated in job training while you were incarcerated, there are several job training opportunities available to women in the community. Job training is important because it enables women to enhance already existing skills and to develop new skills needed in the work force. It is often the single most important factor in staying out of the prison system. Job training, therefore, provides women with a pathway to both freedom and employment, and often to higher paying jobs. Most job training programs are free, and some even provide a small stipend and/or childcare.

It is important to begin exploring job training programs in the community prior to your release from prison. By doing so, you can secure a place in a job training program immediately upon your release. Additionally, exploring such options may have an impact on your release date. A prisoner who informs the Parole Board that she has explored the various options in the community for job training, or is interested in participating in a specific program, is likely to make a favorable impression. As a result, the Parole Board may be more likely to transfer you to a halfway house or to release you on parole.

The DC Department of Employment Services (DOES) provides a referral service which can connect you with job training programs in the community. In order to use the referral service, you will need to meet certain eligibility requirements. You will also need to take a basic literacy and math test in order to match you with the appropriate training program. These tests are generally given twice a day, at 10:30 and 2:00. You can call the DOES for more information about the program requirements.

When you visit the DOES, you will need to provide documentation in order to prove your eligibility. Collect these documents in advance and bring them with you when you go to DOES, because you cannot use the referral service without them. The DOES eligibility requirements, along with numerous other job training resources in the DC area, are listed in this chapter.

DEPARTMENT OF EMPLOYMENT SERVICES – TRAINING OPPORTUNITIES REFERRAL CENTER

Requirements for Eligibility Determination

In order to determine your eligibility for the employment and training programs administered by the DC Department of Employment Services, you must provide proof of the following (you must provide one document under each heading that applies to you):

Social Security Number

- Social Security Card
- Document from Social Security Administration that contains your Social Security number
- Driver's Permit

> Documents used to verify residency must bear your name.

DC Residency

- Driver's Permit
- Voter Registration Card
- Non–Driver Identification Card
- Federal or District 1040 Form(s) (current or previous tax year)
- Rental or Lease Agreement
- Letter from Dept. of Housing & Community Development, or Dept. of Human Services or DC Superior Court
- Learner's Permit
- Rent Receipt(s)
- Utility Bill(s)
- Letter from publicly or privately operated shelter (applies only to homeless individuals.)

Date of Birth/Proof of Citizenship

- Birth Certificate
- Passport
- School Records
- Baptismal Records
- Voter Registration Card
- INS Papers (such as I-94, Alien Registration Card)

For further information call or visit:

Department of Employment Services
Training Opportunities Referral Center
100 U Street, NW
Washington, DC
M–F 8–5:30
(202) 673–6997
(202) 639–2000

Income

Documents used to verify income cannot be older than six months and must represent all family members residing in household.

- Pay Stub(s)
- W-2 Forms
- Federal or District 1040 Form(s)
- Public Assistance Records
- Letter of earnings from employer (must be notarized)

Military Status

Only applicable to individuals who have prior military service.

- DD 214 Documents

Registration for Draft

Verification of draft registration only applies to males born on or after January 1, 1960.

- Selective Service Card

Termination or Layoff

- Layoff Notice

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JOB TRAINING REFERRAL RESOURCES

Organization Name and Type of Training Offered	Address Telephone Number Contact Person Hours	Requirements for Accessing Services	Nature of Services	Cost, Stipend and Fees	Child Care	Dress Code
Center City Community Corp.	1126 First St., NE Washington, DC 20002 (202) 789-0866 M-F 9-5	- Call for appointment	- Assess vocational skills & needs - Employment referral	None	No	No
Change, Inc.	1413 Park Rd., NW Washington, DC 20010 (202) 387-3725 M-F 9-5:30 Ms. Matos, Gracie Rolling	- Walk-in service available	- Assess vocational skills & needs - Training & employment referrals - GED tutoring Tu, Th 6-8pm	None	Refer to UPO	No
Efforts For Ex-Convicts	1329 9th St., NW Washington, DC 20001 (202) 483-3872 M-F 9-5 Gregory Farrell	- Call for appointment - No Halfway House residents or people on psychotropic drugs	- Assess vocational skills & needs - Training & employment referrals	None	No	No
Friendship House Manpower Service	619 D St., SE Washington, DC 20003 (202) 675-9068 M-F 9-5 Jean Walker	- Call for appointment	- Assess vocational skills & needs - Training & employment referrals - Assistance with applications & resumes	None	No	No
Jubilee Jobs	2712 Ontario Rd., NW Washington, DC 20009 (202) 667-7390 M-F 9-5	- Call for telephone screening & appointment - Clean & sober for 3 mos. - HS Diploma or GED - English speaking - Green card - At least 3 references	- Assess vocational skills & needs - Training & employment referrals	None	No	Job appro-priate
People's Involvement Corp.	1100 First St., NW Washington, DC 20001 (202) 797-3910 M-F 9-5:30 Steven Hart	- Call for appointment	- Assess vocational skills & needs - Training & employment referrals	None	No	No

JOB TRAINING REFERRAL RESOURCES

Organization Name and Type of Training Offered	Address Telephone Number Contact Person Hours	Requirements for Accessing Services	Nature of Services	Cost, Stipend and Fees	Child Care	Dress Code
Southwest Community House	156 Q St., SW Washington, DC 20024 (202) 488-7210 M-F 9-5:30 Roberta Patrick	- Call for appointment	- Assess vocational skills & needs - Training & employment referrals	None	Refer to UPO	No
Action to Rehabilitate Community Housing (ARCH) **Carpentry, Weatherization, Blueprint Reading**	2427 MLK Ave., SE Washington, DC 20020 (202) 889-6344 M-F 8-4:30	- Must be 18+ years - Must be DC resident - Call for appointment	- Job skills/readiness training in carpentry field - Job placement in area of specialization - Reading & Math classes available - GED preparation services - Some additional counselling & social service referrals - Lunch & all tools provided	$75/wk	No	Job appro-priate
Armstrong Adult Education Center **Clerical, Dental Assistant, & Literacy Training**	1st and P St., NW Washington, DC 20001 (202) 673-6908 M-F 8:30-3:30 Margaret Tyrus	- Referral through DOES - Call for appointment	- Assess vocational skills & needs - Training available in: Clerical skills - Aug-Jan.; Dental Ass't/Tech - Sept-June; Literacy skills - open entry/exit	-No fees -Stipend of up to $50/wk paid by DOES	No	No
Ayuda, Inc. **Bilingual/Paralegal Assistant**	1736 Columbia Rd. NW Washington, DC 20009 (202) 387-4848 M-F 9-3 June Williams	- Referral through DOES - Acceptance into program depends on felony or misdemeanor charge - Call for appointment	- Assess vocational skills & needs - Training available in: Bilingual Paralegal/Legal Assistant: M-F, 9-3 for 24 weeks (first 12 weeks classroom training-second 12 weeks work experience) - Job placement assistance available to those who successfully complete program - Bilingual services	-No fees -Stipend of up to $50/wk paid by DOES	No	Job appro-priate

JOB TRAINING REFERRAL RESOURCES

Organization Name and Type of Training Offered	Address Telephone Number Contact Person Hours	Requirements for Accessing Services	Nature of Services	Cost, Stipend and Fees	Child Care	Dress Code
Cardozo-Shaw Center **Medical, Computer, Carpentry & Clerical**	1000 U St., NW Washington, DC 20001 (202) 673-6997 M-F 10-2 Albert Sabir	- Referral through DOES - Valid Driver's License - First come, first serve	- Assess vocational skills & needs - Training available in medical, computer, carpentry & clerical trades - Courses start in June & October	-No fees -Stipend of up to $50/wk paid by DOES	No	Job appropriate
Center for Youth Services **Reading assessment, Weatherization, Mechanic**	921 Pennsylvania Ave., SE Washington, DC 20003 (202) 543-5707 M-Th 9-6:30 Dan Deel	- Referral through DOES - Call for appointment	- Assess vocational skills & needs - Reading skills assessment: Mondays at 4 - Training available in: Weatherization Mechanic: M-Th, 9-5 for 24 weeks starting in Dec. & June	-Possible fee for tools -Stipend of $32/wk paid by DOES	Yes Infants 3 mos. to 2 yrs -Need to apply	No
Davis Memorial Goodwill Industries **Retail Sales**	2200 South Dakota Ave., NE Washington, DC 20018 (202) 636-4225 LaSonja A. Thompson	- Must have: social security card; police report not more than 6 mos. old (any charges of theft disqualify applicant); photo ID; reading & math level of at least 8th grade - Call for appointment	- 12 week retail sales training program (8 wks in classroom, 4 wks on-the-job)	-Hourly stipend of $4.85	No	Job appropriate
DC Apprenticeship Council **Carpentry, Electricity, Plumbing, Masonry, Dry Walling**	500 C St., NW Washington, DC 20001 (202) 639-1415 M-F 8:30-5	- Call for appointment - Must be 18+ with High School diploma or GED - Must take GAT battery which is offered weekly by the Council - Driver's License required	- Promote & administer apprenticeship programs - Training & selection of participants done by apprenticeship sponsors - Council assists through referrals to appropriate apprenticeship programs, 90% of which are in building & construction - Must be in school program related to trade	-No fees -Earn while learn: % of craftsmen's salary (approx. $7/hr)	No	No

JOB TRAINING REFERRAL RESOURCES

Organization Name and Type of Training Offered	Address Telephone Number Contact Person Hours	Requirements for Accessing Services	Nature of Services	Cost, Stipend and Fees	Child Care	Dress Code
DC Central Kitchen/Culinary Training Program **Culinary**	425 2nd St., NW Washington, DC 20001 (202) 234-0707 Robert Egger M-F 8:30-3:30	- Call for appointment	- 10 week job training program (at Univ. of DC) in cooking for completion of Food Service Certification exam	$35/wk	No	No
DC Joint Ventures Work Program **Carpentry, Landscaping, Auto Mechanics, Machine Repair**	St. Elizabeth's Hospital Dix Bldg., Rm. 207 2700 MLK Jr. Ave., SE Washington, DC 20032 (202) 373-7565 Mr. Grandanson	- Must be referred by Parole or Probation officer - Must complete SF 171	- Assess vocational skills - Placed appropriate to skills & training	-Paid by Dept. of Public Works	No	Job appropriate
DC Public Schools Margaret Murry Washington Career High School **Cooking**	27 O St., NW Washington, DC 20001 (202) 673-7224 M-F 10-6 Betty Simms	- Referral through DOES (otherwise there are substantial fees) - Call for appointment	- Assess vocational skills & needs - Training available in cooking recruitment begins in July for September program (10-11:40 English/Math, 12:15-6pm - Culinary training) - Provides job readiness preparation & job placement assistance	-No fees -Stipend of up to $50/wk paid by DOES	No	Uniforms provided by DOES
Information Processing Training Center of the Washington Urban League **Word processing**	1375 Missoun Ave., NW Washington, DC 20011 (202) 882-0400 M-F 8:30-5:30 Mrs. Robinson	- Referral through DOES - DC residents only - High School diploma or GED - Call for appointment	- Assess vocational skills & needs - 24 week word processing courses offered two to four times a year, M-F 9-4	-No fees -Stipend of up to $50/wk paid by DOES	No	Job appropriate

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JOB TRAINING REFERRAL RESOURCES

Organization Name and Type of Training Offered	Address Telephone Number Contact Person Hours	Requirements for Accessing Services	Nature of Services	Cost, Stipend and Fees	Child Care	Dress Code
Liberation of Ex-Offenders Through Jobs **Typing & IBM computer**	2301 MLK Jr. Ave., SE Washington, DC 20020 (202) 561-2439 M-F 8:30-5 Joe Guifrida	- Walk-in service available - Referral through parole/probation officer - No pending charges - Clean & sober - No psychotropic medicine	- Assess vocational skills & needs - Job placement assistance - 16 week typing & IBM computer courses offered in April & September: MTW, 5:30-7:30pm	None	No	Appropriate clothes can be supplied
Options, Inc **Computer, Cosmetology, Clerical Skills**	124 P St., SW Washington, DC 20024 (202) 863-1006 M-F 9-5 Henry Moore	- Referral through U.S. District Court of Parole & Probation which determines placement into program (job readiness training, on the job training [as available], direct job placement) - Call for appointment	- Can take job readiness class for one week at beginning of each month (computer skills, cosmetology, clerical, etc.) - 90 day follow-up on job training done by Options, Inc. staff - Options, Inc. pays for federal bonding for, & offers tax credits to employers who train and/or hire ex-offenders	-No fees -Stipend of up to $75/wk paid by Court	No	Job appropriate
Orion Business Services **Communications Technology, Cable TV Installation, Computer Software, Literacy Skills**	1003 K St., NW Washington, DC 20001 (202) 347-5388 M-F 9-4 Dale Woods	- Referral through DOES - Call for appointment	- Assess vocational skills & needs - Training available in: Communications Technology (Must be able to lift 50-75 lbs, not be afraid of heights, have valid Driver's Lic. with good driving record) Jan-June; Cable TV Installation - Jan-June; Computer Software - Jan-April; Literacy/Basic Skills - open	-No fees -Stipend of up to $50/wk paid by DOES	No	Job appropriate
Project Uplift **Computer, Culinary, Printshop, Cosmetology/Barbering**	261 17th St., SE Washington, DC 20003 (202) 543-3887 M-F 9-3 Bill Riddles	- Walk-in available - Need referral verifying unstable home situation - Positive ID (not welfare ID) required - Drug & alcohol free - After 3 days absence, terminated from program	- Assess vocational/educational skills & needs - Reading & math placement exam - On-sight skills training, M-F, 9-3 - Provides lunch daily - Provides Flashpass for transportation	-No fees -Stipend of $35/wk	No	Job appropriate

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JOB TRAINING REFERRAL RESOURCES

Organization Name and Type of Training Offered	Address Telephone Number Contact Person Hours	Requirements for Accessing Services	Nature of Services	Cost, Stipend and Fees	Child Care	Dress Code
Single Mothers Are Resources Too (SMART) **Educational Aides, Child Care Aides**	14th Street & Independence Ave., SE Washington, DC 20032 (202) 561-1100 M-F 6-6	- Must be: DC resident; high school graduate; mother of small child(ren) with valid certificate	- Job skills training in field of child care and/or educational aide	-$50/wk	Yes	No
Southeast Vicariate Cluster **Telecommunication Installation/Maintenance**	2005 MLK Jr. Ave., SE Washington, DC 20020 (202) 889-5581 M-F 9-3:30 Deborah Bernard	- Referral through DOES - Call for appointment	- Assess vocational skills & needs - Training available in: Telecommunications Installation/Maintenance. M- F, 9-3:30 for 24 weeks starting in Nov. & May - Job placement assistance available to those who successfully complete training	-No fees -Stipend of up to $50/wk paid by DOES	No	No
University of DC, Van Ness Campus **Computer Maintenance/Repair, Accounting**	4200 Connecticut Ave., NW Washington, DC 20008 (202) 727-1323 M-F 9-4 Sandra Edgecombe, Mr. Carter	- Referral through DOES - Call for appointment	- Assess vocational skills & needs - Training available in: Computer Maintenance/Repair - M-F, 9-3 for 36 weeks starting in June; Accounting - M-F, 9-4, Oct.-June 30	-No fees -Stipend of up to $50/wk paid by DOES	No	Job appro-priate
Washington Institute for Training **Word processing, clerical and literacy**	3224 16th St., NW Washington, DC 20010 (202) 265-2626 M-F 8:30-5 Rev. Edward Hailes, Harry Hare	- Referral through DOES - D.C. Residents only - Call for appointment	- Assess vocational skills & needs - 6 month word processing, clerical & literacy courses offered twice a year (Oct. & Mar.) 8:30-3, M-F - Counselling, placement & follow-up services offered	-No fees -Stipend of up to $50/wk paid by DOES	No	No

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JOB TRAINING REFERRAL RESOURCES

Organization Name and Type of Training Offered	Address Telephone Number Contact Person Hours	Requirements for Accessing Services	Nature of Services	Cost, Stipend and Fees	Child Care	Dress Code
Washington Urban League Training Program **Clerical, Computer, Administrative**	1375 Missouri Ave., NW Washington, DC 20011 (202) 882-0400 M-F 9-4 Brenda Robinson	- Call for appointment	- 20 week training program in secretarial & office skills - Upon completion of program, job placement assistance available	$35/wk	Yes	Job appropriate
ConServe **Computer Training, Life Skills, Office Skills**	712 G St., S.E. Washington, DC 20005 (202) 639-9760 Darlene Babil or Janet Thompson T-Th 9-3:30	- High School Diploma or GED - Homeless	- 16-20 week program in computer training, office skills, and life skills - GED Program	-No fees, $15 for books if able to pay	-No but assistance provided finding daycare	Job appropriate if able

XXI. EDUCATION AND LITERACY TRAINING PROGRAMS

Once you are released from prison, there are several opportunities for you to continue your education in the community. Adult Basic Education classes, GED classes to prepare you for your high school equivalency degree, and basic literacy classes in English and Spanish are offered at many locations throughout the District of Columbia. Some classes are even geared specifically toward ex-offenders and their families. If you are interested in any of these programs, you should contact:

District of Columbia Public Library
Adult Basic Education Office
Room 426
Washington, DC 20001
(202) 727-1616

The Library will send you free of charge a directory of educational and literacy training programs in the District. The directory lists available programs, their location and phone number, and any fees required to participate. Although the fees range up to $55, most are free. The directory also contains information on program requirements and registration procedures.

If you live outside of the District, the office can provide you with information on programs in your area.

XXI. DRUG TREATMENT PROGRAMS

In 1991, the National Women's Law Center created the following resource list of women's drug treatment programs in the Washington, DC metropolitan area as part of our work on issues related to women and addiction. We continue to update the list on a regular basis and circulate it to advocates, social service providers, and DC Department of Corrections personnel who are responsible for providing women with referrals for drug treatment in the community. Many women prisoners preparing to return to the community, along with women already in the community, have used the list themselves to obtain drug treatment.

For women prisoners with a history of alcohol or other drug use, obtaining or continuing drug treatment in the community is perhaps the most crucial step toward remaining out of the criminal justice system. Staying clean and sober will help you in your efforts to maintain employment and rebuild family ties. Obtaining drug treatment also has several public health benefits, including reducing your chances of contracting HIV. If you are pregnant and use alcohol or other drugs, drug treatment is critical to ensure a healthy pregnancy.

If you wish to obtain drug treatment in the community, read through the following chart carefully and highlight the programs which appear to serve your needs. Remember that while the following list of drug treatment programs is comprehensive, it is not exhaustive. Programs open and close on an ongoing basis, so you should not be discouraged if the program you call has closed or does not have any space available. Keep trying until you are admitted to a program which is right for you.

For more information on drug treatment in the DC Department of Corrections and in the community, including twelve-step programs, see Chapter XVII, "Getting Help for Drug Addiction and Alcoholism."

WOMEN'S DRUG TREATMENT RESOURCES
WASHINGTON, DC

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. &/ CHILD CARE
Adams Mill Alcoholism Center 1808 Adams Mill Rd., NW (202) 673-6618 M,Th 8-7, TWF 8-4 Murray Hatton	- Call for appointment	- 3-6 month day treatment program, 4-5 hours daily (with meal) - Individual & group counseling - Hispanic program available - Evening AA meetings 3/week - Health education - Predominantly older clientele	Free	- No services - No child care
Community of Hope 1417 Belmont St., NW (202) 232-9022 Lois Wagner	- Live within 3 block radius - Call for an appointment	- OB/GYN services - Pediatric services - Pre-Natal Clinic on Wednesdays - Limited counseling services	Sliding-scale fee (according to your income)	- Yes - No child care
Comprehensive Alcohol & Drug Abuse Center (CADAC) 2700 MLK Jr. Ave., SE (202) 373-7740	- Call for appointment - Must be clean & sober before admission to program	- Up to 6 months residential treatment program with 1 year continuing outpatient care	Free	- No services - No child care

WOMEN'S DRUG TREATMENT RESOURCES
WASHINGTON, DC

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. &/ CHILD CARE
Concerned Citizens 3115 MLK Jr. Ave., SE (202) 563-3210 M-F 9-8 (weekend times for AA/NA meetings as well) Wayne Dockery Pregnant/Post Partum Program 601 Raleigh Ave., SE (202) 574-2480 M-F 8:30-7 Sharon Dockery	- Referrals through APRA & Employment Assistance Program	- One year outpatient program: 2 groups/week, 1 individual session/week, 2 AA and/or NA a week in community - Referral service for employment & housing - HIV education & support groups - Urine analysis - Pregnant/Post-partum women can also participate in nutrition education, drug/alcohol treatment & education, day care	Free	- Yes - No child care
Demeter House 301 I St., NW (202) 898-1092 Clarise Wilkins	- APRA referral only	- Residential treatment program for women with up to 2 children	Free	- Has child care
Detox Center for Men & Women D.C. General Hospital 1900 Massachusetts Ave., SE (202) 727-5163 (Alcohol) (202) 727-9335 (Cocaine)	- Walk in service	- 4 days alcohol detox services - 10 days cocaine detox services	Free (DC Residents)	- Yes - No child care
D.C. Employee's Counseling Service D.C. Government 1825 Connecticut Ave., NW Suite 101 (202) 673-6610	- Work or live in Washington, DC	- Outpatient treatment program: 1/week for 6 mos. - Drug & alcohol treatment	Free	- No services - No child care

WOMEN'S DRUG TREATMENT RESOURCES
WASHINGTON, DC

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. &/ CHILD CARE
House of Ruth (Unity Inn) 459 Massachusetts Ave., NW (202) 544-1134 24 Hours Hoang Rogers	- Woman must be pregnant, clean and sober - Referred through Women's Services and/or Post Partum Program at Karrick Hall, DC General Hospital - Call for appointment	- Residency for 10 mothers/10 infants for 6 months-1 year - Residents must find daycare for infants - Resident must be involved in job training program, school, or some equivalent to maintain residency - Individual & group counseling - Parenting & health education - Women who complete program can continue participation in groups	Free, but mandatory "rent savings" program of $120/month, which is returned at end of program.	- Yes - No child care
Karrick Hall D.C. General Hospital 1900 Massachusetts Ave., SE (202) 727-5770 24 Hours Ms. Yancey	- Referral through Central Intake (202) 727-5163 - Call for appointment	- 28 day inpatient program with space for up to 15 pregnant & post-partum women - 5 month alcohol & drug aftercare program (provided by Univ. of DC): AA/NA meetings 3/week	Free	- Yes - No child care
KOBA Associates Project Support for Women 680 Rhode Island Ave., NE (202) 526-2936 198	- Walk in before 2 p.m. or call for appointment - No Thursday appointments	- Outpatient treatment program for pregnant women and women with children up to age 2 - Main drug must be crack to qualify - Group/Indiv. counseling: 4 hours/day; 4 days/week - Parenting workshops - Counseling and voluntary testing for HIV or STDs provided, including referrals for services	Free	- Yes - Has child care 199

WOMEN'S DRUG TREATMENT RESOURCES
WASHINGTON, DC

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. &/ CHILD CARE
KOBA Partnership for Family Preservation 1413 Girard St., NW (202) 483-4300 Vanesta L. Poitier	- Call for appointment	- 1 year residential program for women with up to 4 children - Group/Indiv. & family counseling - Vocational training - 6 month aftercare program	Free	- Yes - Has child care
Kolmac Clinic 1411 K St., NW (202) 638-1952	- Call for appointment	- 18 month treatment program: 2 month intensive inpatient therapy; 16 mos. weekly out-patient treatment - Group/Indiv. & family counseling	- 1st 8 weeks: $3960 - 16 mos.: $88/week - Some insurance accepted	- Yes - No child care
Metropolitan Alcoholism Center 2020 K St., NW (202) 466-6729 M-F 8-8pm Chris Benz	- Call for appointment	- 3-6 mos. outpatient treatment program for alcohol & non-opiate drugs - Group/Indiv. counseling - Education groups 3/week - Weekly aftercare for 1 year - Social service referrals	$200 per week $60 per group - Insurance	- Yes - No child care
7 East (formally New Beginnings) Greater SE Community Hospital 1310 Southern Ave., S.E. (202) 574-7021 24 Hours	- Referrals through court system, hospitals, word of mouth	- 10-14 day Detox & Rehab. - Special grant for services to 2 pregnant women	- Determined at admission - Medicaid pays for 7-10 days	- Yes - No child care

WOMEN'S DRUG TREATMENT RESOURCES
WASHINGTON, DC

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. &/ CHILD CARE
New Directions Psych. Inst. Drug Abuse Rehab. Center 4460 MacArthur Blvd., NW (202) 965-8275	- Call for appointment	- 30 day inpatient detox. - Women's issues group: 3/week for 3 mos.	$150 per week outpatient - Medicaid	- Yes - No child care
New Expectations 1119 Lamont St. (202) 986-0140 24 Hours Shelly Stancil	- Call for appointment	- 1 year residential program for 7 pregnant women & their infants - Drug/alcohol treatment & support - Maternal/child health education - Referrals to New Endeavors by Women [(202)682-5825] for job, education & housing resources - 1st 30 days restricted to house	Free	- Yes - Has child care services
Next Step 2101 K St., NW (202) 296-4422 10-6 Cindy Waddell, Director	- Probation officer referrals - US Probation & Parole pays for part of treatment - Employer & family referrals accepted	- 4-6 month intensive outpatient program: 4/week - Group/Indiv. counseling - Education & relapse prevention groups - Urine analysis 2/week	- 4-6 month prog.: $256/ week - Aftercare free - Some insurance accepted	- Yes - No child care
Regional Addiction Prevention, Inc. (RAP) 3451 Holmead Pl., NW (202) 462-7500 24 Hours Ms. Ahmad 202	- APRA referral	- 1-2 year co-ed residential treatment program - Drug & alcohol treatment & support - Vocational & educational services - Group/Indiv. counseling	$50/day Sliding scale available	- No services - No child care 202

WOMEN'S DRUG TREATMENT RESOURCES
WASHINGTON, DC

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. &/ CHILD CARE
Saint Martin's House 116 T St., N.E. (202) 526-5426 24 Hours Sister Mary Louise Wessell	- APRA referral	- 6 month residential program for recovering pregnant & post-partum women - Job, educational, housing & day care referrals - Group/Indiv. counseling	Free	- Yes - No child care
Samaritan Inn 2523 14th St., NW (202) 667-8831 M-F 9-5 Deborah Wimberley	- Call to make appointment	- Transitional residence (up to 6 months after delivery) for pregnant, addicted women - Addiction counseling, job referral & support	$50 per week - No insurance accepted	- Yes - Has child care services
Harriet Tubman Pre-Treatment 1226 Vermont Ave., NW (202) 667-9162	- Call for appointment	- Medical services and counseling for women seeking treatment - Women may stay for 1 month	Free	
Sarah House 1329 M St., N.W. (202) 232-6167	Must successfully complete Harriet-Tubman Pre-treatment	- 6 months to 1 year residence for recovering addicts - Drug social service counseling - Waiting list	Free	- No services - No child care

WOMEN'S DRUG TREATMENT RESOURCES
WASHINGTON, DC

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. &/ CHILD CARE
Second Genesis 1320 Harvard St., NW (202) 234-6800 24 Hours Annie Morabito Administrative Office: 7910 Woodmont Ave. Bethesda, MD (301) 497-7917	- APRA referral - Call for interview & evaluation	- 1 year residence, with 6-7 months aftercare available - Group/Indiv. & family counseling - Prenatal & medical referrals - Vocational & educational services	$16,000 a year - Some insurance accepted & some financial assistance available	- Yes - Has some child care
Seton House Providence Hospital 1053 Buchanan St., NE (202) 269-7777 24 hours	- Call for appointment into outpatient program	- 5-14 days inpatient detox - 36 week outpatient program: 3/week for 6 weeks; 2/week for 6 weeks; 1/week for 24 weeks - Group/Indiv. counseling	- Detox: $800-900/day - Outpatient: $4000 pay as you go - DC Medicaid accepted	- Yes, if you have Doctor at Providence Hosp.
United Planning Organization 1411 K St., NW (202) 546-9809 M-F 9-5:30 Shirley Fisher	- Call for appointment for interview	- Group/Indiv. & family counseling - Must attend for at least 6 mos. - Mandatory AA/NA meetings in person's community - Referrals to social services	- $25 evaluation fee - $15 per session	- No services - No child care

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WOMEN'S DRUG TREATMENT RESOURCES
WASHINGTON, DC

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. &/ CHILD CARE
WACADA 2813 12th St., N.E. (202) 526-0975 M-F 9:30-8	- Call for appointment	- Individualized programs - Meet 1-4 days/week for at least 6 mos. - Group/Indiv. & family counseling - AA/NA meetings in community	$40/week alcohol prog. $65/week drug prog. - Sliding fee scale	- Yes - No child care
Women's Service Clinic D.C. General Hospital 1905 E St., SE (202) 727-5166 M-F 8-4:30, Sat-Sun 7-11am	- Must be DC resident - Call for appointment	- 28 day inpatient detox for pregnant/post-partum substance abusers - Group/Indiv. counseling - Parenting & health education - 7 day/week outpatient substance abuse program - Social service & health referrals	- Paid by DC Dept. of Corrections	- Yes - Child care only if in parenting group

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WOMEN'S DRUG TREATMENT RESOURCES
MARYLAND

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. ?/ CHILD CARE
Addiction Program 9314 Piscataway Road Clinton, MD (301) 599-2154 M-Th 8am-9pm, Fri 8-4:30	- Call for appointment for interview	- 26 week outpatient program: Group/Indiv. counseling; drug & alcohol treatment	- $4 to $84 - Insurance & medicaid accepted	- Yes - No child care
Addiction Treatment Center 18101 Prince Phillip Drive Olney, MD (301) 774-8870, 24 hours (301) 774-8888 for crises Robert Cox	- Call for appointment	- 3 day inpatient detox. - 28 day inpatient program: Group, individual, family & couples therapy; drug & alcohol treatment - Day by Day program: 28 day outpatient program from 8:30am-10:30 pm (same as inpatient without overnights) - Outpatient Alcohol Treatment Services (OATS): Meet 4 evenings a week from 4 weeks to 6 mos.	- Detox: $384/day - 28 day rehab: $298/day - 28 day inpatient: $168/day - OATS: $62/session - Doctor & lab fees extra - Some insurance accepted - Detox covered by Medicaid	- Yes, with medical check - No child care

WOMEN'S DRUG TREATMENT RESOURCES
MARYLAND

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. ♀/ CHILD CARE
Adult Addiction Programs 751 Rockville Pike Rockville, MD (301) 217-1300 Intake M-F 1-3 ONLY	- Must be Montgomery County resident - Call for appointment for interview (first 8 women accepted during intake period)	- 12 week (2/week) outpatient program: Group/Indiv. counseling; AA/NA meetings; Urine analysis; Social service & vocational referrals - "Moms & Tots" program: Same format as 12 week outpatient program with specialization for pregnant & post-partum women	- Sliding fee scale (must be Montgomery County resident)	- Yes - No child care
Alcohol & Drug Recovery, Ltd. 9300 Annapolis Road Lanham, MD (301) 577-5255 Pearl Plaza Annapolis, MD (410) 266-8635 5 Crane Highway Glen Burney, MD (410) 768-3526	- Call for appointment for interview	- Out-Patient treatment once a week for up to 6 mos. - Group/Indiv. counseling - Monthly urine analysis	$15 intake $75 in depth evaluations $2-$40 groups - Sliding scale available - Some insurance accepted, no Medicaid	- Yes - No child care
Changing Point P.O. Box 396 4100 College Avenue Ellicot City, MD 20401 (301) 621-4771	- Call for appointment	- 14-30 day inpatient detox: Group/Indiv. & family counseling - In-house AA/NA meetings		- Yes - No child care

WOMEN'S DRUG TREATMENT RESOURCES
MARYLAND

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. &/ CHILD CARE
Circle Treatment Center 424 N. Frederick Avenue #8 Gaithersburg, MD 20878 (301) 258-2626 M-F 10-6	- Employment Assistance Program & DWI referrals accepted	- Individualized treatment programs: Intensive: 5/week for 5weeks Aftercare: 3/week for 4weeks; 2/week for 2nd 4weeks; 1/week for 1 year - Inpatient detox available - Drug & alcohol education groups - Group/Indiv. counseling - Multilingual services available	- Fee determined by woman's resources - Sliding scale available	- Yes - No child care
Drug Alcohol Rehabilitation Education Systems 1 Chamber Avenue Capital Heights, MD (301) 499-1834 Ms. Stevenson	- Call for appointment for interview	- Intensive 1 year day treatment & outpatient programs - Social service referrals & work with community resources	- Sliding scale available $2600 to $4500	- Yes - No child care
Kolmac Clinic 18552 Office Park Drive Gaithersburg, MD (301) 330-7696 SAME AS DC PROGRAM 1003 Spring Street Silver Spring, MD (301) 589-0255 214	- Call for appointment with counselor for assessment of need	- 18 month program: 8 weeks intensive outpatient treatment; 16 mos. weekly treatment - Group/Indiv. & family counseling	$3840 first 8 weeks $86/week for 16 months or for each visit.	- Yes - No child care 215

WOMEN'S DRUG TREATMENT RESOURCES
MARYLAND

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. &/ CHILD CARE
Mountain Manor Route 15, P.O. Box E Emmitsburg, MD (301) 447-2360	- Call for appointment	Safe Harbor Program - 1 year residential program for pregnant women or women who have recently given birth - Can bring up to 3 children General Program - 30 day inpatient detox. - 2 month aftercare: Group/Indiv. counseling; drug & alcohol treatment & education - 5 General Program locations in Maryland: Emmitsburg, Westminster, Frederick, & 2 in Baltimore	- 30 day inpatient: $286/day - Outpatient: $8500 - Sliding scale available - Medicaid for patients under 21 & some insurance accepted	- Yes - Has child care services
New Carrollton Drug Intervention Counseling Center 6016 Princess Garden Parkway (301) 459-0823	- Call for appointment for interview	- Individualized programs for those recently released from inpatient - Group/Indiv. counseling - Education & vocational referrals	- $4-78 per session - Sliding scale available	- Yes - No child care

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WOMEN'S DRUG TREATMENT RESOURCES
MARYLAND

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. ?/ CHILD CARE
New Life for Girls 806 Littlestown Pike Westminster, MD (410) 848-1360 Diane Windesheim	- Call for appointment for interview	- 13 month residential Christian based program: 1st 4 mos. intensive program in Westminster-group/indiv. counseling; 9-10 mos. working on farm in Dover, PA with some religious focus - Children only allowed on weekends until completion of 1st 4 mos. in program	$25 for paperwork	- Yes - Has child care services
Olson Planning Group 307 West Patrick Street Frederick, MD (301) 695-2500	- Call for appointment for interview	- 1 year residential treatment program for 4 women with up to 2 children each (0-10 years old) - Social service referrals	$200/month per single woman	- Yes - No child care
Reality, Inc. Quarterway House 419 Main Street Laurel, MD (301) 490-5551 24 hours Sharon Connelly (outpatient)	- For 28 day prog. call on Weds. at 9am (1st 10 calls accepted) - For outpatient call 4-12am	- 28 day inpatient program: Group/Indiv. counseling - 13 week outpatient program: 3/week for group counseling - Children can attend Thurs. night family meetings - Pregnant & Post-partum women are a priority	- 28 day prog: $30-85/day - Outpatient: $60/week - Some insurance accepted	- Yes - No child care except Thurs. meeting

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WOMEN'S DRUG TREATMENT RESOURCES
MARYLAND

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. ♀/ CHILD CARE
Renaissance Greater Laurel Beltsville Hosp. 7100 Contee Road Laurel, MD (301) 497-7917 Michele Frankovic	- Call for appointment for interview	- 3 inpatient day detox. - 6 week. alcohol education program - 8 week intensive outpatient program - 12 week aftercare program - 26 week DWI program	- $75 for initial evaluation - Alcohol education: $120/week - 8 week. outpatient: $60/day - 12 week. aftercare & DWI program: $30/session	- Yes, until 2nd tri-mester - No child care
Second Genesis 4620 Mellwood Road P.O. Box 668 Upper Marlboro, MD (301) 568-4822	- Call for appointment - Must be Maryland resident	- 9-12 month residential treatment program for women with up to 2 children under the age of 10 - Group/Indiv. & family counseling - Vocational counseling - Parenting classes	Free	- Accepts pregnant women before 5th-6th month of pregnancy - Has child care
Southern Regional Clinton Addiction Counseling Program 9314 Piscataway Road Clinton, MD (301) 599-2154	- Walk in service available or call for appointment	- Alcohol & drug treatment program: 1/week for at least 6 months - Group counseling	- $4-82 per session - Sliding scale available	- Yes - No child care
Suburban Hospital 8600 Old Georgetown Road Bethesda, MD (301) 530-2522	- Walk in service available or call for appointment	- 3-5 day Detox - Outpatient Program: 3 evenings/week, 7 weeks with 15 weeks aftercare.	- Inpatient $370/day - Outpatient $2000 for program - Some insurance accepted	- Yes, until 1st trimester - No child care

WOMEN'S DRUG TREATMENT RESOURCES
MARYLAND

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. ?/ CHILD CARE
Williams Center 7100 Oxon Hill Road Oxon Hill, MD (301) 567-4693	- Call for appointment	- 27 week education and counseling program; 3 hours/week for 15 weeks, 2 hours/week and group meetings for 12 weeks with continued care component. Opening day care facility, participates in community outreach program. Offers women's focus groups.	$60 intake $60/week 15 weeks $30/week 12 weeks $40 relapse/aftercare	- Yes - No child care
Women's Halfway House (affiliated with Reality, Inc. (301) 490-5551) 200 Laurel Avenue Laurel, MD (301) 498-3117 Beth Decker Susan Brown	- Must have completed 28 day inpatient program before admission to house - Must be clean & sober - Call for appointment for interview - PG County DWI referrals	- 6 month residential program - Group/Indiv. counseling - Random urine testing - Must gain employment as promptly as possible (responsible for rent accrued during unemployment)	- $84 per week once employed	- No services - No child care

WOMEN'S DRUG TREATMENT RESOURCES
MARYLAND

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. ?/ CHILD CARE
X-Cell Catonsville, MD (410) 788-2145 Rosalyn Palmer	- Call for appointment for intake	- 90 day residential treatment program (up to 1 year): Group/Indiv. counseling; drug/alcohol education; life skills; women's issues - 90 day aftercare program: 1/week; random urine analysis; relapse prevention groups - Referrals to X-Cell transitional homes for those already connected with X-Cell	$1000/month - Sliding scale available	- Yes, case by case - No child care

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WOMEN'S DRUG TREATMENT RESOURCES
VIRGINIA

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. ♀ CHILD CARE
Alexandria Substance Abuse 2355 Mills Road Alexandria, VA (703) 329-2000	- Walk in or call for appointment	- Inpatient Detox program - Outpatient counseling and methadone program.	- Sliding fee scale - Insurance, no Medicaid	- Yes - Has child care [child room without supervision
Arlington Alcohol & Drug Program 1725 N. George Mason Drive Arlington, VA (703) 358-4900 3025 16th St. South Arlington, VA (703) 358-5850	- Must be resident of Arlington, VA	- Outpatient weekly program generally 3-6 months. - Referrals, when appropriate, to inpatient, detox, methadone or other public service contractors. - Special programs for women. - Structure depends on individual.	- Sliding fee scale - Insurance - Medicaid	- Yes - No
Arlington Hospital Addiction Program 1701 N. George Mason Dr. Arlington, VA (703) 558-6536	- Telephone or in person assessment to determine appropriate level of treatment.	- 21-28 day inpatient treatment & Detox Aftercare - 15 week structured program, then 1 year aftercare.	$360/day Detox $340/day intermediate care - Insurance - Medicaid	- Yes - No

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WOMEN'S DRUG TREATMENT RESOURCES
VIRGINIA

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. ♀ CHILD CARE
Arlington Hospital Counseling Center 1916 Wilson Blvd. Arlington, VA (703) 558-6750 (outpatient facility) (703) 558-6536 (inpatient unit)	- Call for intake interview - Response within 24 hours - No waiting list	- Outpatient Detox and treatment - Intensive treatment: 3 times/week for 7 weeks; twice a week for 15 weeks aftercare; 1 year aftercare planning and follow-up.	$52 per session Total $2100 - Insurance, no Medicaid	- Yes - No child care
Comprehensive Alcohol Treatment Services (CATS) (affiliate Fairfax Hospital System) 3300 Gallows Road Falls Church, VA (703) 698-1530	- Set up appointment for assessment - Must talk to admissions nurse	- Inpatient: 21-28 days - Outpatient: daily program same as inpatient; 1 year follow-up. - 6-9 month program. Mandatory A.A./N.A., random drug screening. Bi-weekly meetings, 1st 3 months, weekly meetings next 3-9 months. Help with vocational/social service needs. Referral for severe cases.	$550/day Detox $49/day rehab. $5500 Outpatient - Insurance, no Medicaid	- Yes - No

WOMEN'S DRUG TREATMENT RESOURCES
VIRGINIA

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. ♀ CHILD CARE
Fairfax County Substance Abuse/Alcohol and Drug Services 3900 Germantown Road Fairfax, VA (703) 934-5476	- Fairfax County resident or work or Fairfax County - Must come in for assessment and referral for any of Referral Center services	- Referral Center services vary in intensity, length, and focus. All include substance abuse counseling, education, referral, aftercare and care management.	- Free	Services depend on site
Referral Center Services include:				- Yes Has child care
Outpatient Programs: Women's Recovery Center (703) 352-2094		- Day treatment 3 phases: 3-4 months daily; 2-3 months 2 evenings/week; aftercare 2-3 months 2 times/week.	- Sliding fee scale $2-$96 Insurance, no Medicaid	
Northwest Site 1850 Cameron Glen Reston, VA (703) 481-4004		- Random drug tests		- Yes - No child care
		- Offers Adult Programs - 18 weeks Mental health services as well.	- Sliding fee scale -- $2-$96 - Insurance	
Falls Church Site 500 North Washington Street Falls Church, VA (703) 533-0180		- Women's groups: 2 times/weeks for 12 weeks.		- Yes - No child care
231		- Six months to 1 year, Supervised apartment program, group and individual counseling for recovering addicts who have completed primary treatment program.	- Sliding fee scale -- $2-$96 - Insurance	231
			- Rent @ $230/month	- No - No child

WOMEN'S DRUG TREATMENT RESOURCES
VIRGINIA

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. ♀ CHILD CARE
[Fairfax County Residential Affiliate cont'd] Crossroads 5801 North Kings Highway Alexandria, VA		- Long term -- 12-18 month residential treatment facility. Offers counseling, education and support throughout program and re-entry phase; 8 month waiting list. - Intermediate care facility -- 6-12 weeks treatment program. Individual, group, family counseling, health education; waiting list.	- 0-$1700/month Sliding scale - Insurance, no Medicaid	- Yes - Has child care
New Beginning 4211 Walney Road Chantilly, VA (703) 968-7330			0-$1700/month Sliding scale - Insurance, no Medicaid	- Yes - Has child care

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WOMEN'S DRUG TREATMENT RESOURCES
VIRGINIA

ORGANIZATION NAME ADDRESS PHONE # CONTACT PERSON	REQUIREMENTS FOR ACCESSING SERVICES	NATURE OF SERVICES	COST	PREG. ♀ CHILD CARE
Ethos Foundation 5201 Leesburg Pike Falls Church, VA 207 West Market Street Falls Church, VA (703) 671-5335 (See Maryland)	- Intake interview	- Outpatient substance abuse counseling -- 12-24 week sessions. - Women's Chemical Dependency Group - once a week.	$180 for 4 week program $30 per session - Insurance no Medicaid	- Yes - No official child care arrange-ments but flexi-ble
Demeter House 1301 South Monroe St. Arlington, VA (703) 553-9365	- Must be pregnant or have one child - Access through social services in county of residence	- 6 month residential treatment program for 6 women with children.	$74 per day, each mother and each child.	- Yes - Has child care
Pavillion for Bahavorial Health Northern Virginia Doctor Hospital 601 S. Carlin Springs Road Arlington, VA (703) 578-2020	- Appointment with intake counselor by phone	- 28 day Detox - Inpatient/Outpatient rehab. and aftercare for 2 years.	- Medicare, VA Medicaid Insurance	- Yes - No child care
Vanguard Services 506 North Pollard Street Arlington, VA (703) 841-0660 234	- Call for appointment	- 90-180 day inpatient treatment @ Phoenix, referrals for outpatient and aftercare.	$60/day	- Yes 235

NATIONAL WOMEN'S LAW CENTER

The National Women's Law Center is a non–profit organization that has been working since 1972 to advance and protect women's legal rights. The Center focuses on major policy areas of importance to women and their families, including education, health and reproductive rights, employment, income security, and family support — with special attention given to the concerns of low–income women. As a legal arm of the women's movement, the Center has litigated groundbreaking cases and filed briefs in landmark Supreme Court decisions; advocated before state and federal policymakers to shape legislation and policies affecting women's lives; and educated the public about issues important to women. The Center's legal expertise makes it an important contributor to women's progress at work, at home, and in almost every aspect of women's lives.

In 1990, the Center launched the Women in Prison Project to address the serious problems confronting women prisoners. The Project provides legal, counseling, and advocacy services to women incarcerated by the District of Columbia Department of Corrections. Today, the Project serves approximately 1000 women incarcerated at the Lorton Minimum Security Annex, the Correctional Treatment Facility, the District of Columbia Central Detention Facility and halfway houses, along with women released to the community. In addition to its local activities on behalf of women prisoners, the Center works on a national level conducting public education, providing technical assistance to policymakers and advocates, and disseminating information on issues affecting women prisoners. The Center also hosted the Seventh National Roundtable for Women in Prison in 1993. The Roundtable brought together over 450 advocates, policymakers and former prisoners to discuss crucial issues affecting women prisoners and their families, and to develop strategies for decreasing and preventing the incarceration of women.

In October 1993, the Center's work with women prisoners prompted it to engage in class action litigation on behalf of all women incarcerated by the District of Columbia. On December 13, 1994, Judge June Green, of the U.S. District Court for the District of Columbia, found that women prisoners were subjected to sexual harassment and provided with programs and opportunities inferior to those provided to male prisoners. The Court found violations of the Fifth and Eighth Amendments to the U.S. Constitution, 42 U.S.C. § 1983, Title IX of the Education Amendments of 1972, and local District of Columbia code. The Court ordered broad remedial relief in the areas of sexual misconduct, obstetrical and gynecological care, education and vocational programs, and environmental safety. (*Women Prisoners of the District of Columbia Department of Corrections v. District of Columbia*, 1994 U. S. Dist. LEXIS 19222 (D.D.C. Dec. 13, 1994)).

Brenda V. Smith is Senior Counsel and Director of the Women in Prison Project at the Center. She received her J.D. from Georgetown University Law Center in 1984 and her B.A. from Spelman College in 1980. Cynthia Dailard is a Berkeley Law Foundation Fellow and Staff Counsel at the Center. She received her J.D. from Boalt Hall School of Law, University of California at Berkeley in 1994 and her A.B. from Harvard University in 1990.

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